Case 19-23313-JKS Doc 1 Filed 07/09/19 Entered 07/09/19 09:09:25 Fill in this information to identify your case: United States Bankruptcy Court for the: T 8. BANGGUPTOY GUMP FILED _ District of _New___ Jersey__ Chapter you are filing under: Case number (If known): _ Chapter 7 2018 JUL -9 A 9: 02 ☐ Chapter 11 ☐ Chapter 12 Check if this is an amended filing ☐ Chapter 13 Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/17 The bankruptcy forms use you and Debtor 1 to refer to a debtor fill joint case-and in joint cases, these forms use you to ask for info the answer would be yes if either debtor owns a car. When inform Case # : 19-23313-07I+ Debtor 2 to distinguish between them. In joint cases, one of the sp Debtor.: RAYMOND C REAVIS, JR same person must be Debtor 1 in all of the forms. Chapter: 07I+ Be as complete and accurate as possible. If two married people an Filed : July 09, 2019 09:16:11 information. If more space is needed, attach a separate sheet to th er Deputy : CAMMY GINGERELLI (if known). Answer every question. Receipt: 539491 Amount: \$0.00 **Identify Yourself** Part 1: RELIEF ORDERED Clerk, U.S. Bankruptcy Court **About Debtor 1:** District Of New Jersey 1. Your full name Write the name that is on your Raymond government-issued picture First name First name identification (for example, your driver's license or Middle name passport). Middle name Reavis Bring your picture Last name Last name identification to your meeting with the trustee. Jr. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you N/A have used in the last 8 First name First name years Middle name Middle name Include your married or maiden names. Last name Last name First name First name Middle name Middle name Last name Last name 3. Only the last 4 digits of xxx - xx - <u>3 6 3 8</u> your Social Security number or federal OR Individual Taxpayer 9 xx - xx -Identification number (ITIN)

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Debtor 1

Raymond C.

Reavis

raye 2 01 03

Case number (# known)

About Debtor 2 (Spouse Only in a Joint Case): **About Debtor 1:** 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer **Identification Numbers** (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names Business name Business name If Debtor 2 lives at a different address: 5. Where you live 1108 Wheatsheaf Road Number Street Street Number 07036 NJ Linden ZIP Code ZIP Code City State Union County County If Debtor 2's mailing address is different from If your mailing address is different from the one yours, fill it in here. Note that the court will send above, fill it in here. Note that the court will send any notices to this mailing address. any notices to you at this mailing address. Number Street Number Street P.O. Box P.O. Box City State ZIP Code ZIP Code City State Check one: Check one: 6. Why you are choosing this district to file for Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, bankruptcy I have lived in this district longer than in any I have lived in this district longer than in any other district. other district. I have another reason. Explain. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) (See 28 U.S.C. § 1408.)

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Debtor 1

Raymo	nd C.
iret Name	Middle Neme

Reavis Last Name

Case number (if known)

	he chapter of the	Check o	ne. (For a	a brief description	on of each, see <i>Notic</i> o, go to the top of pa	ce Required by 11 age 1 and check th	U.S.C. § 342(b) for Individuals Filing e appropriate box.
a	ankruptcy Code you re choosing to file	☑ Cha		20.0//. / 110	- 3 G n. 1 n. 1 n. 1 n. la. 1 la.		
u	nder	☐ Cha					
		☐ Cha	•				
		☐ Cha					
. H	ow you will pay the fee	loca your subr	l court for self, you mitting y	or more details u may pay with	s about how you m n cash, cashier's c nn your behalf, you	nay pay. Typicall check, or money	eck with the clerk's office in your y, if you are paying the fee order. If your attorney is pay with a credit card or check
							tion, sign and attach the nts (Official Form 103A).
		By la less pay	aw, a jud than 15 the fee i	dge may, but in 10% of the office in installments	s not required to, vicial poverty line the colors. If you choose the	waive your fee, a at applies to you nis option, you m	ion only if you are filing for Chapter and may do so only if your income is r family size and you are unable to ust fill out the Application to Have the with your petition.
	ave you filed for	☑ No				The state of the s	
b	ave you filed for ankruptcy within the ist 8 years?		District		When	MM / DD / YYYY	Case number
b	ankruptcy within the		District District		When When	MM / DD / YYYY	Consumber
b	ankruptcy within the		District		When	MM / DD / YYYY	Case number
b	ankruptcy within the					MM / DD / YYYY	Consumber
b la	ankruptcy within the st 8 years?		District		When	MM / DD / YYYY	Case number
b la	ankruptcy within the set 8 years? re any bankruptcy ases pending or being	☐ Yes.	District		When	MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY	Case number
b la	re any bankruptcy ases pending or being led by a spouse who is ot filing this case with ou, or by a business artner, or by an	☐ Yes.	District District		When When	MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY	Case number
b la	re any bankruptcy ases pending or being led by a spouse who is ot filing this case with ou, or by a business	☐ Yes.	District District Debtor District		When When	MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY	Case number
b la	re any bankruptcy ases pending or being led by a spouse who is ot filing this case with ou, or by a business artner, or by an	☐ Yes.	District District Debtor District		When When	MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY	Case number Case number Relationship to you Case number, If known
b la	re any bankruptcy ases pending or being led by a spouse who is ot filing this case with ou, or by a business artner, or by an	☑ Yes. ☑ No ☑ Yes. ☑ No.	District Debtor District Debtor District Debtor Office to lie	ne 12.	When When When	MM / DD / YYYY	Case number Case number Relationship to you Case number, if known Relationship to you Case number, if known
b la	re any bankruptcy ases pending or being led by a spouse who is ot filing this case with ou, or by a business artner, or by an ffiliate?	☑ Yes. ☑ No ☑ Yes. ☑ No.	District Debtor District Debtor District Go to li Has you	ne 12.	When When When	MM / DD / YYYY	Case number Case number Relationship to you Case number, if known Relationship to you Case number, if known

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Debtor 1

First Name

Last Name

			1 0000011	. ago . c. cc	
4	Ravmond	C.	Reavis	Case number (if known)	

. Are you a sole proprietor	No. (Go to Part 4.			
of any full- or part-time business?	🔲 Yes.	Name and location of busine	ss		
A sole proprietorship is a business you operate as an individual, and is not a		Name of business, if any			
separate legal entity such as a corporation, partnership, or LLC.		Number Street			
If you have more than one sole proprietorship, use a separate sheet and attach it			A COMMUNICATION OF THE PROPERTY OF THE PROPERT		
to this petition.		City		State	ZIP Code
		Check the appropriate box to	o describe your business:		
		☐ Health Care Business (a	s defined in 11 U.S.C. § 1	01(27A))	
		☐ Single Asset Real Estate	(as defined in 11 U.S.C.	§ 101(51B))
		☐ Stockbroker (as defined	in 11 U.S.C. § 101(53A))		
		☐ Commodity Broker (as d	efined in 11 U.S.C. § 101	(6))	
		☐ None of the above			
For a definition of small business debtor, see 11 U.S.C. § 101(51D).	☐ Yes.	the Bankruptcy Code. I am filing under Chapter 11 Bankruptcy Code.	and I am a small busines:	s debtor acc	cording to the definition in
		Any mazardous Property	y or Ally Property Tha	at Needs	
·					
	Z No				
Do you own or have any property that poses or is alleged to pose a threat					
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?	Z No				
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to	Z No	What is the hazard?	eded, why is it needed?_		
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs	Z No	What is the hazard?	eded, why is it needed? _		
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building	Z No	What is the hazard? If immediate attention is ne Where is the property?	eded, why is it needed? _		
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building	Z No	What is the hazard? If immediate attention is ne Where is the property?			

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Debtor 1

Raymond

<u>Reavis</u>

Case number (If known)

Part 5:

Explain Your Effor

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

ts to Receive a Br	iefing About Credit Counseling			
About Debtor 1:		Ab	out Debtor 2 (Sp	oouse Only in a Joint Case):
You must check on	e:	Yo	u must check one	: :
counseling age	efing from an approved credit ency within the 180 days before I ruptcy petition, and I received a ompletion.		counseling age	ofing from an approved credit ncy within the 180 days before I uptcy petition, and I received a impletion.
	f the certificate and the payment t you developed with the agency.		Attach a copy of plan, if any, that	the certificate and the payment you developed with the agency.
counseling age	efing from an approved credit ency within the 180 days before l ruptcy petition, but I do not have a ompletion.		counseling age	efing from an approved credit ncy within the 180 days before I uptcy petition, but I do not have a empletion.
	after you file this bankruptcy petition, a copy of the certificate and payment			ifter you file this bankruptcy petition, copy of the certificate and payment
services from a unable to obta days after I ma	sked for credit counseling an approved agency, but was in those services during the 7 ide my request, and exigent merit a 30-day temporary waiver nent.		services from a unable to obtain days after I made	sked for credit counseling in approved agency, but was in those services during the 7 de my request, and exigent merit a 30-day temporary waiver ent.
requirement, att what efforts you you were unable	day temporary waiver of the tach a separate sheet explaining made to obtain the briefing, why e to obtain it before you filed for the what exigent circumstances file this case.		requirement, atta what efforts you you were unable	day temporary waiver of the ach a separate sheet explaining made to obtain the briefing, why to obtain it before you filed for what exigent circumstances ile this case.
dissatisfied with	be dismissed if the court is your reasons for not receiving a you filed for bankruptcy.	1.1	dissatisfied with	oe dismissed if the court is your reasons for not receiving a ou filed for bankruptcy.
If the court is sa still receive a br You must file a agency, along w	ntisfied with your reasons, you must reasons, you must refing within 30 days after you file. certificate from the approved with a copy of the payment plan you by. If you do not do so, your case		If the court is sat still receive a bri- You must file a c agency, along w	isfied with your reasons, you must efing within 30 days after you file. tertificate from the approved ith a copy of the payment plan you y. If you do not do so, your case
Any extension of	of the 30-day deadline is granted and is limited to a maximum of 15		Any extension of	the 30-day deadline is granted and is limited to a maximum of 15
	ed to receive a briefing about ing because of:		l am not require credit counselin	ed to receive a briefing about ng because of:
☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
☐ Active duty	. I am currently on active military		Active duty.	I am currently on active military

duty in a military combat zone.

If you believe you are not required to receive a

briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

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Raymond C.
First Name Middle Name

Debtor 1

Reavis

Case number (If known)

Pa	ort 6: Answer These Ques	stions for Reporting Purposes	•		
16.	What kind of debts do you have?	16a. Are your debts primarily as "incurred by an individual p	consumer debts? Co	nsumer debts are mily, or household	defined in 11 U.S.C. § 101(8) d purpose."
	you navo.	☑ No. Go to line 16b.☑ Yes. Go to line 17.			
		16b. Are your debts primarily money for a business or inves	business debts? Businestment or through the oper	<i>iness debts</i> are d ration of the busir	ebts that you incurred to obtain less or investment.
		□ No. Go to line 16c.□ Yes. Go to line 17.			
		16c. State the type of debts you o	we that are not consumer	debts or business	debts.
17.	Are you filing under Chapter 7?	☐ No. I am not filing under Chap	oter 7. Go to line 18.	A CORE LA TRESCUENCIA CONTRACA CONTRACA LA TREMA DE CONTRACA POR PARA LA TREMA DE CONTRACA POR A PORTA A PARA A	менентун жонун өндөөн ж ^а ң өндү көй өрө докол жоно на авих каласка жана саласта жана он
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be	Yes. I am filing under Chapter administrative expenses a No Yes	7. Do you estimate that af are paid that funds will be	ter any exempt pr available to distrit	operty is excluded and oute to unsecured creditors?
	available for distribution to unsecured creditors?			napon konsalla si Santaka ka Santaka ka Salla sa Santaka ka Salla sa Santaka ka Salla sa Santaka ka Salla sa S	
18.	How many creditors do you estimate that you owe?	✓ 1-49☐ 50-99☐ 100-199☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19.	How much do you estimate your assets to be worth?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 mill \$10,000,001-\$50 m \$50,000,001-\$100 n \$100,000,001-\$500	illion nillion	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	✓ \$1,000,001-\$10 mill \$10,000,001-\$50 m \$50,000,001-\$100 n \$100,000,001-\$500	illion nillion	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Pa	rt 7: Sign Below				
Fo	r you	I have examined this petition, and correct.	I declare under penalty of	perjury that the in	formation provided is true and
		If I have chosen to file under Chap of title 11, United States Code. I ur under Chapter 7.	ter 7, I am aware that I ma nderstand the relief availat	ay proceed, if elig ble under each ch	ible, under Chapter 7, 11,12, or 13 apter, and I choose to proceed
		If no attorney represents me and I this document, I have obtained and			
		I request relief in accordance with			
		I understand making a false staten with a bankruptcy case can result i 18 U.S.C. 3§ 152, 1341, 1519, and	n fines up to \$250,000, or	or obtaining mon imprisonment for	ey or property by fraud in connection up to 20 years, or both.
		Signature of Debtor 1	eus .	Signature of D	ebtor 2
		Executed on 06/25/2019		ū	
		MM / DD /YY	77	Executed on	MM / DD /YYYY

Case 19-23313-JKS Doc 1 Filed 07/09/19 Entered 07/09/19 09:09:25 Fill in this information to identify your case and this filing: Reavis Raymond Debtor 1 First Name Middle Name Last Name Debtor 2 Last Name (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: District of New Jersey Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ☐ Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home ☐ Land Investment property Describe the nature of your ownership ☐ Timeshare State ZIP Code City interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: ☐ Single-family home N/A Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home ☐ Land ☐ Investment property Describe the nature of your ownership ☐ Timeshare City State ZIP Code interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only

County

Debtor 1 and Debtor 2 only

At least one of the debtors and another

property identification number: _

Other information you wish to add about this item, such as local

Check if this is community property

(see instructions)

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1.3.	N/A Street address, if available	e, or other description State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of interest (such as fee the entireties, or a life.)	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
	County		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this its property identification number:	Check if this is co (see instructions) em, such as local	mmunity property
2. Add you	the dollar value of the have attached for Part	portion you own for a 1. Write that number l	II of your entries from Part 1, including any entried	s for pages	\$0.00
Part 2:	Describe Your	Vehicles			
Do you you own 3. Cars	own, lease, or have leg n that someone else drive s, vans, trucks, tractors	gal or equitable intere es. If you lease a vehicl	st in any vehicles, whether they are registered or e, also report it on <i>Schedule G: Executory Contracts</i> s, motorcycles	not? Include any vehicles and Unexpired Leases.	S
Do you you own	own, lease, or have leg n that someone else drive s, vans, trucks, tractors No Yes	gal or equitable intere es. If you lease a vehicl	e, also report it on Schedule G: Executory Contracts	not? Include any vehicles and Unexpired Leases. Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on <i>Schedule D:</i>
Do you you own 3. Cars	own, lease, or have legate that someone else drivens, vans, trucks, tractors No Yes Make: Model: Year:	yal or equitable interests. If you lease a vehicles, sport utility vehicles VW Jetta 2014	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. Current value of the
Do you you owr 3. Cars	own, lease, or have legate that someone else drivens, vans, trucks, tractors No Yes Make: Model: Year: Approximate mileage: Other information: Balance \$7,000	yal or equitable intereses. If you lease a vehicles, sport utility vehicles VW Jetta 2014 37,900	e, also report it on Schedule G: Executory Contracts i, motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$1,500.00 aims or exemptions. Put d claims on Schedule D:

	First Name Mik				
3.3.	Make:	KTM 390 Duke	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla	d claims on Schedule D:
	Model:		Debtor 2 only	Creditors Who Have Clair	тѕ Ѕесигеа ву Ргорепу.
	Year:	2017	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage			entire property?	portion you own?
	-	· · · · · · · · · · · · · · · · · · ·	At least one of the debtors and another		
	Other information:	A. W. W 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	D At 1 16 th to 1	s 6,888.00	\$ 1,248.75
	\$5,639.75		Check if this is community property (see instructions)	7	1
3.4.	Make:	N/A	Who has an interest in the property? Check one.	Do not deduct secured cla	
.	BBadalı		Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Model:		Debtor 2 only	Creditors with Figure Oldin	na occured by 1 topeny.
	Year:	<u> </u>	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage);	☐ At least one of the debtors and another	entire property?	portion you own?
	Other information:		The location of the deptate and allower.		
	Other information:		☐ Check if this is community property (see instructions)	\$	\$
	<i>nples:</i> Boats, trailers, n o		d other recreational vehicles, other vehicles, and accessatercraft, fishing vessels, snowmobiles, motorcycle accesso		
Exan	aples: Boats, trailers, r o es		atercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. Debtor 1 only		d claims on Schedule D:
Exan N Y	nples: Boats, trailers, r o es Make: Model:	notors, personal w	atercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	ories Do not deduct secured clause the amount of any secure	d claims on Schedule D:
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Exam i N i Y 4.1.	nples: Boats, trailers, rooes Make: Model: Year: Other information:	notors, personal wa	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured class the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ns Secured by Property. Current value of the
Exam in Y 4.1.	mples: Boats, trailers, rooes Make: Model: Year: Other information:	notors, personal wa	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured class	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$
Exam i N i Y 4.1.	mples: Boats, trailers, roo es Make: Model: Year: Other information: own or have more that Make: N/A	notors, personal wa	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured class the amount of any secure	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$
Exam in Y 4.1.	mples: Boats, trailers, rooes Make: Model: Year: Other information:	notors, personal wa	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured class	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$
Exam in Y 4.1.	mples: Boats, trailers, roo es Make: Model: Year: Other information: own or have more that Make: N/A	notors, personal wa	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$
Exam in Y 4.1.	mples: Boats, trailers, roo es Make: Model: Year: Other information: own or have more that Make: N/A Model:	notors, personal wa	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured class the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$
Exam in Y 4.1.	mples: Boats, trailers, roo es Make: Model: Year: Other information: own or have more that Make: Model: Year:	notors, personal wa	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$
Exam in Y 4.1.	mples: Boats, trailers, roo es Make: Model: Year: Other information: own or have more that Make: Model: Year:	notors, personal wa	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$
Exam in Y 4.1.	mples: Boats, trailers, roo es Make: Model: Year: Other information: own or have more that Make: Model: Year:	notors, personal wa	Who has an interest In the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this is community property? Check one.	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$

P	art 3: Describe Your Personal and Household Items		
De	o you own or have any legal or equitable interest in any of the following items?	Current valu portion you Do not deduct or exemptions.	own?
6.	. Household goods and furnishings		
	Examples: Major appliances, furniture, linens, china, kitchenware		
	Ø No The state of		
	Yes. Describe	\$	
7.	Electronics		
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; collections; electronic devices including cell phones, cameras, media players, games	music	
	☐ No ☐ Yes. Describe	\$	3,000.00
	Televelsion, Cell phone, Computer, Paystation and Cames.	Ψ	1
8.	. Collectibles of value		
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles		
	☑ No		
	Yes. Describe	\$	
9	Equipment for sports and hobbles	niterior and a service account of the service and an extension of the service and the service of the service and the service a	
٧.	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; of and kayaks; carpentry tools; musical instruments	canoes	
	☑ No	geography (geography and entire a	
	☐ Yes. Describe	\$	
10	0, Firearms	and the second s	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment		
		i	
	Yes, Describe	\$	
11	1. Clothes		
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
	☐ No ☐ Yes. Describe Jeans, Sneakers, Shoes, Shirts, Coats	\$	700.00
	Jeans, Stieck, Stilles, Stills, Coals	representation of the contract	
10	2. Jewelry		
12	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, g gold, silver	ems,	
	No No	construct to transfer from the construction of the construction of a \$1000 construction of \$1.000 construction of the construc	3,000.00
	Yes. Describe Men's wedding ring, Womens engagement and wedding band	\$	0,000.00
13	3. Non-farm animals		
	Examples: Dogs, cats, birds, horses		
	☑ No		
	Yes, Describe	\$	
14	4. Any other personal and household items you did not already list, including any health aids you did not	list	
	☑ No		
	Yes. Give specific	•	

6,700.00

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached

information.....

for Part 3. Write that number here

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Part 4:	Describe	Your	Financial	Assets

Do you own or have any	y legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Examples:</i> Money you	ı have in your wallet, in your hon	ne, in a safe deposit box, and on hand when you file your petit	ion
☑ No			
☐ Yes			\$ 10.00
17. Deposits of money Examples: Checking, and other s	savings, or other financial accou similar institutions. If you have m	nts; certificates of deposit; shares in credit unions, brokerage ultiple accounts with the same institution, list each.	houses,
☑ Yes		Institution name:	
	17.1. Checking account:	Affinity Credit Union	\$2.91
	17.2. Checking account:	Bank of America	\$ 4.00
	17.3. Savings account:	Affinity Credit Union	<u>\$</u> 4.03
	17.4. Savings account:		\$
	17.5. Certificates of deposit:		<u> </u>
	17.6. Other financial account:	NA 144 - 144 - 144 - 144 - 144 - 144 - 144 - 144 - 144 - 144 - 144 - 144 - 144 - 144 - 144 - 144 - 144 - 144 -	\$
	17.7. Other financial account:		\$
	17.8. Other financial account:	Management from the state of th	
	17.9. Other financial account:		\$
•	, or publicly traded stocks , investment accounts with broke	erage firms, money market accounts	
☑ No ☐ Yes	Institution or issuer name:		
			
	Annua 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 11		\$ \$
			Y
	-444-t-4	rated and unincorporated businesses, including an intere	st in
an LLC, partnership,	and joint venture	% of owners	hip:
an LLC, partnership, ☑ No ☐ Yes. Give specific	and joint venture Name of entity:	% of owners 0%	•
an LLC, partnership, ☑ No	and joint venture Name of entity:	0%	

Case 19-23313-JKS Doc 1
Raymond Middle Name Last Name

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Petition Page 12 of 63 enumber (#known)

Debtor 1

Desc

Non-negotiable instrum	include personal che	er negotiable and non-negotiable instruments cks, cashiers' checks, promissory notes, and money orders. nnot transfer to someone by signing or delivering them.	
Yes. Give specific information about	issuer name:		\$
them			\$
	A	A STATE OF THE STA	\$
		01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
☑ No			
Yes. List each account separately.	Type of account:	Institution name:	
	401(k) or similar plan:		\$
	Pension plan:		\$
	IRA:		\$
			\$
	Retirement account:		\$
	Keogh:		· ·
	Additional account:		Ψ
	Additional account:		\$
Security deposits and Your share of all unused		nade so that you may continue service or use from a company	
Your share of all unused	d deposits you have r with landlords, prepa	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$ \$
Your share of all unused Examples: Agreements companies, or others No	d deposits you have r with landlords, prepa In Electric:	id rent, public utilities (electric, gas, water), telecommunications	\$ \$ \$
Your share of all unused Examples: Agreements companies, or others No	d deposits you have r with landlords, prepa In Electric: Gas: Heating oil: Security deposit on re	id rent, public utilities (electric, gas, water), telecommunications	\$ \$ \$ \$
Your share of all unused Examples: Agreements companies, or others No	d deposits you have r with landlords, prepa In Electric: Gas: Heating oil: Security deposit on re Prepaid rent:	id rent, public utilities (electric, gas, water), telecommunications	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others No	d deposits you have r with landlords, prepa In Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone:	id rent, public utilities (electric, gas, water), telecommunications	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others No	d deposits you have r with landlords, prepared in Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone:	id rent, public utilities (electric, gas, water), telecommunications	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others No	d deposits you have r with landlords, prepared to the landlords of the lan	id rent, public utilities (electric, gas, water), telecommunications	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others No	d deposits you have r with landlords, prepared in Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone:	id rent, public utilities (electric, gas, water), telecommunications	\$ \$
Your share of all unused Examples: Agreements companies, or others No Yes	d deposits you have r with landlords, preparation of the landlords of the	id rent, public utilities (electric, gas, water), telecommunications stitution name or individual: ntal unit:	\$ \$
Your share of all unused Examples: Agreements companies, or others No Yes	d deposits you have r with landlords, preparation of the landlords of the	id rent, public utilities (electric, gas, water), telecommunications	\$ \$
Your share of all unused Examples: Agreements companies, or others No Yes	d deposits you have r with landlords, prepared in Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other:	of money to you, either for life or for a number of years)	\$ \$
Your share of all unused Examples: Agreements companies, or others No Yes	d deposits you have r with landlords, preparation of the landlords of the	of money to you, either for life or for a number of years)	\$ \$
Your share of all unused Examples: Agreements companies, or others No Yes	d deposits you have r with landlords, prepared in Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other:	of money to you, either for life or for a number of years)	\$ \$

Case 19-23313-JKS Doc 1 Filed 07/09/19 Entered 07/09/19 09:09:25 Desc Raymond Petition Page 13 of 63 enumber (if known)

26 U.S.C. §§ 530(b)(1), 529A	(0); 0110 020(0)(1).		qualified state tuition program.	
☑ No	. ,			
☐ Yes	Institution name a	nd description. Separately file the records	of any interests.11 U.S.C. § 521(c	c):
		,		•
		ULMANUMAN . P. A.F.		\$
		AL-WINEARWY -		\$
				\$
5. Trusts, equitable or future in exercisable for your benefit	nterests in property	(other than anything listed in line 1), a	and rights or powers	
🗹 No			VARIA P. 1940 (1.17)	-
Yes. Give specific				
information about them				\$
	imes, websites, proc	, and other intellectual property eeds from royalties and licensing agreem		··-
Yes. Give specific information about them				\$
7. Licenses, franchises, and o	ther general intang	ibles		
Examples: Building permits, e	xclusive licenses, co	operative association holdings, liquor lice	nses, professional licenses	
🗹 No	E-1000010111000111000100010000000000000		nellar ila esta esta esta esta esta esta esta est	many
Yes. Give specific				
information about them				\$
loney or property owed to you	1? 		ere meg alle tallet i til ged Være av til store kvel flyddi Verende	Current value of the portion you own? Do not deduct secured claims or exemptions.
•				dame of enemplation
B. Tax refunds owed to you ☑ No				
✓ No✓ Yes. Give specific informa			Federal:	\$
✓ No ✓ Yes. Give specific informa about them, including	g whether			\$\$
☑ No ☐ Yes. Give specific informa	g whether returns		State:	\$\$
✓ No	g whether returns			\$ \$ \$
No Yes. Give specific informa about them, including you already filed the and the tax years Family support Examples: Past due or lump so	y whether returns sum alimony, spousa	ıl support, child support, maintenance, div	State: Local:	\$ \$ \$
No Yes. Give specific informa about them, including you already filed the and the tax years Family support Examples: Past due or lump s	y whether returns sum alimony, spousa	ıl support, child support, maintenance, div	State: Local: orce settlement, property settleme	\$ \$ \$
No Yes. Give specific informa about them, including you already filed the and the tax years Family support Examples: Past due or lump so	y whether returns sum alimony, spousa	ll support, child support, maintenance, div	State: Local: orce settlement, property settleme	\$\$ \$\$ ent
No Yes. Give specific informa about them, including you already filed the and the tax years Family support Examples: Past due or lump so	y whether returns sum alimony, spousa	ıl support, child support, maintenance, div	State: Local: orce settlement, property settleme Alimony: Maintenance:	\$sent \$s
No Yes. Give specific informa about them, including you already filed the and the tax years Family support Examples: Past due or lump so	y whether returns sum alimony, spousa	il support, child support, maintenance, div	State: Local: orce settlement, property settleme Alimony: Maintenance: Support:	\$\$ \$\$ ent
No Yes. Give specific information about them, including you already filed the and the tax years Family support Examples: Past due or lump so	y whether returns sum alimony, spousa	ll support, child support, maintenance, div	State: Local: orce settlement, property settleme Alimony: Maintenance: Support: Divorce settlement:	\$sent \$s
No Yes. Give specific informa about them, including you already filed the and the tax years Family support Examples: Past due or lump so	y whether returns sum alimony, spousa	il support, child support, maintenance, div	State: Local: orce settlement, property settleme Alimony: Maintenance: Support:	\$sent \$s
No Yes. Give specific information about them, including you already filed the and the tax years Family support Examples: Past due or lump so No Yes. Give specific information. Other amounts someone ov Examples: Unpaid wages, dis Social Security be	wes you ability insurance pay	support, child support, maintenance, diverse and the support of th	State: Local: Orce settlement, property settleme Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$sent \$s
No Yes. Give specific information about them, including you already filed the and the tax years Family support Examples: Past due or lump s No Yes. Give specific information of the tax years Other amounts someone ov Examples: Unpaid wages, dis Social Security be	wes you ability insurance pay	ments, disability benefits, sick pay, vacati	State: Local: Orce settlement, property settleme Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$sent \$s
Yes. Give specific information about them, including you already filed the and the tax years 9. Family support Examples: Past due or lump so No Yes. Give specific information of the second	wes you ability insurance pay	ments, disability benefits, sick pay, vacati	State: Local: Orce settlement, property settleme Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$\$ \$ent

Debtor 1	Case 19 Raymond	9-23313-JKS	Doc 1	Filed 07 Petition	7/09/19 _Page 1	Entere 4 of 6 3 °	ed 07/09/19 se number (if known	9 09:09:25	Desc
		policies bility, or life insura	ance; health s	avings account	(HSA); credi	it, homeowi	ner's, or renter'	s insurance	
	s. Name the insu	rance company and list its value.	Company n	iame;		!	Beneficiary:		Surrender or refund value:
						-			\$
			e						\$
If you a proper	are the beneficia ty because some	rty that is due yo ry of a living trust, eone has died.	u from some expect proce	one who has c eds from a life i	died insurance po	licy, or are	currently entitle	ed to receive	
☑ No		nformation					. , ,	. ,	
— 16	s. Give specific i	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					\$
Examp	oles: Accidents, e	parties, whether employment dispu				a demand	l for payment		
☑ No		. alaina							
Lu Ye	s. Describe each	ı claim							<u> </u>
	off claims	unliquidated cla	ims of every	nature, includi	ing counterd	claims of ti	he debtor and	rights	
☐ Ye	s. Describe each	ı claim		., ., .,					•
] V
35 Any fir	nancial assets v	ou did not alrea	lv list						
☑ No		ou aju siot un ou	.,					y,	
		nformation							\$
36. Add th	ne dollar value o	of all of your entr	ies from Part	t 4, including a	iny entries f	or pages y	ou have attacl	ned	s 20.94
1011 4	it 4. William Clinic I			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	_								
Part 5:	Describe /	Any Business	-Related F	Property Yo	u Own or	r Have a	n Interest l	n. List any ı	real estate in Part 1.
37. Do yo t	ı own or have a	ny legal or equit	able interest	in any busines	ss-related pr	roperty?			
-	. Go to Part 6.								
☐ Ye	s. Go to line 38.								
									Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Acco u	nts receivable o	or commissions	∕ou already e	earned					•
☑ No									
☐ Ye	s. Describe								\$
		nishings, and su d computers, softwa		rinters, copiers, fa	x machines, ru	ugs, telephon	nes, desks, chairs	, electronic device	s
[7] No									

☐ Yes. Describe.....

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40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	
☑ No	ALL ALL MINISTERS AND ALL ALL ALL ALL ALL ALL ALL ALL ALL AL
Yes. Describe	\$
	annument.
41. Inventory	
No experience of the contract	APPLIANTALIS PLAN
☐ Yes. Describe	\$
42. Interests in partnerships or joint ventures	
☑ No	
%	\$
%	\$
%	\$
43. Customer lists, malling lists, or other compilations ☑ No	
Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
□ No	
☐ Yes. Describe	should delibe of FT
Tes. Describe	\$
	on and arrivatives
44. Any business-related property you did not already list	
☑ No	
☐ Yes. Give specific	\$
information	\$
	Ψ
	\$
	\$
	\$
	\$
	*
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached	\$ 0.00
for Part 5. Write that number here	^
	gantagan araway katalong barang b
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest	in.
If you own or have an interest in farmland, list it in Part 1.	
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
☑ No. Go to Part 7. □ Yes. Go to line 47.	
Tes, Go to line 47.	0
	Current value of the portion you own?
	Do not deduct secured claims
	or exemptions.
47. Farm animals	
Examples: Livestock, poultry, farm-raised fish	
☑ No	-money nj
☐ Yes	
	\$
	areasan I

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First Name Middle Name Last Name PCLILIC	Tage 10 01 05	
48. Crops—either growing or harvested		
☑ No		
Yes. Give specific information		\$
49. Farm and fishing equipment, implements, machinery, fixtur	es, and tools of trade	
☑ No ☐ Yes		
		\$
50. Farm and fishing supplies, chemicals, and feed		
☑ No ☐ Yes		properties
		\$
51. Any farm- and commercial fishing-related property you did	not already list	
☐ Yes. Give specific		
		\$
52. Add the dollar value of all of your entries from Part 6, include for Part 6. Write that number here	ding any entries for pages you have attached	\$ 0.00
e de la gradició de la gradició de la deservació de la gradició de la gradició de la gradició de la gradició d La gradició de la gr	and the second of the second o	er er en er
Part 77 Describe All Property You Own or Have	an Interest in That You Did Not List Abov	e
53. Do you have other property of any kind you did not already Examples: Season tickets, country club membership	list?	
2 No		\$
Yes. Give specific information		\$
Annual or season and consent and the consent of the		\$
54. Add the dollar value of all of your entries from Part 7. Write	that number here	\$ 0.00
Part 8: List the Totals of Each Part of this Form	n	
55. Part 1: Total real estate, line 2		→ \$
56. Part 2: Total vehicles, line 5	\$2,748.75	8
57. Part 3: Total personal and household items, line 15	\$6,700.00	
58. Part 4: Total financial assets, line 36	\$356.00	
59. Part 5: Total business-related property, line 45	\$	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54	+\$0.00	
62. Total personal property. Add lines 56 through 61	\$ 9,804.75 Copy personal property total	→ + _{\$} 9,804.75
	The second secon	*

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

9,804.75

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			i cuuon Laac
Fill in this in	nformation to ident	ify your case:	
Debtor 1	Raymond	С	Reavis
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)) First Name	Middle Name	Last Name
United States	Bankruptcy Court for the	he: District of New Jerse	у
Case number			
(If known)			

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that Ilmits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Darf 1:	Identify	the Pro	perty You	Claim	as Exem	nt
Fail Lis	adentity.	LIIO FIU	heith ion	Claun	da Pveili	Pι

	cription of the property and line A/B that lists this property	on Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief descriptio	n: 2014 VW Jetta	\$ <u>8,500.00</u>	2 \$ 1,500.00	(11USC 522 (d)(2)
Line from Schedule	A/B: 3.3		☐ 100% of fair market value, up to any applicable statutory limit	
Brief descriptio	n: Electronics	<u>\$ 3,000.00</u>	\$ 3,000.00	(11 USC 522(d)(3)
Line from Schedule	A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief descriptio	n: Jewelry	<u>\$2,500.00</u>	2 \$ 1,700.00	(11 USC 522 (d)(4)
Line from Schedule	A/B: <u>12</u>		☐ 100% of fair market value, up to any applicable statutory limit	

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Raymond First Name

С

Petitimeavis Page 18 of 63ase number (If known)_

Debtor 1

Part 2: **Additional Page**

Brief descripti on Schedule A	on of the property and line VB that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from	N/A	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Schedule A/B: Brief description: Line from Schedule A/B:	N/A	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	<u>N/A</u>	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	N/A	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	N/A	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	N/A	\$	\$ \$ any applicable statutory limit	
Brief description: Line from Schedule A/B:	N/A	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	N/A	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B;	N/A	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	N/A	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	<u>N/A</u>	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	N/A	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	

Case 19-23313-JKS Doc 1 Filed 07/09/19 Entered 07/09/19 09:09:25 Des

Petition Page 19 of 63

Fill in this information to identify your case:

Debtor 1 Raymond C. Reavis

First Name Middle Name Last Name

Debtor 2 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: District of New Jersey

Case number (If known)

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below.

for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. inabetical order according to the creditor's name.	Do no	nn A unt of claim it deduct the of collateral.		of collateral supports this	Column C Unsecured portion If any
2.1 Afftnity Credit Union	Describe the property that secures the claim:	\$	7,884.00	\$	8,500.00	1,500.00
Creditor's Name P. O. Box 621 Number Street	2014 VW Jetta Car					
Basking Ridge NJ 07020	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated					
City State ZIP Code	☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit					
Check if this claim relates to a community debt Date debt was incurred	U Other (including a right to offset) Last 4 digits of account number	erna				
2.2 M & T Bank	Describe the property that secures the claim:	\$	9,370.00	\$	4,300.00 s	0.00
Creditor's Name P. O. Box 900 Number Street	2013 VW Jetta Car]		-	•	
	As of the date you file, the claim is: Check all that apply.					
Millboro DE 19966 City State ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	 An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) 				٠	
	Judgment lien from a lawsuit					
At least one of the debtors and another Check if this claim relates to a community debt	Other (including a right to offset)					

5 E	Desc

Case 19-23313-JKS Doc 1 Filed 07/09/19 Entered 07/09/19 09:09:25 Description C. Petitipavis Page 20 of 63 Page 10 Raymond

Part 1: Additional Page After listing any entries on this p by 2.4, and so forth.	age, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral,	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2-3 Freedomroad Financial	Describe the property that secures the claim:	\$5,639.75	\$ 6,888.00	\$_1,248.25
1515 west 22 Street				
Number Street				
Suitre 100 W.	As of the date you file, the claim is: Check all that apply.			
Oak Brook IL 60523 City State ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
Check if this claim relates to a community debt		•		
Date debt was incurred	Last 4 digits of account number	and supplies the first of the supplies of the	i Limiteri Vyrikova kilosta i kirotik kitotiki i kitotiki i ili kirotiki i ili kirotiki i ili kirotiki i ili k	
N/A	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZiP Code	Unliquidated			
Who owes the debt? Check one.	Disputed			
Debtor 1 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	•		
community debt				
Date debt was incurred	Last 4 digits of account number		restriction of consecutive Projects in Projects in Section 18 th anniend Section 18 th Associated Section 18 th	
N/A	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street				
	As of the date you file, the claim is: Check all that apply.	•		
City State ZIP Code	☐ Contingent ☐ Unliquidated			
Olay Olate Zii Gode	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
☐ Check if this claim relates to a community debt	- Other filled daily a light to choosy	•		
Date debt was incurred	Last 4 digits of account number		I	
-	In Column A on this page. Write that number here:	\$		
If this is the last page of your form, Write that number here:	add the dollar value totals from all pages.	\$	والمراوات المراوات ا	····

Case 19-23313-JKS Doc 1 Filed 07/09/19 Entered 07/09/19 09:09:25 Desc Raymond C. Petitical vis Page 21 of 63 enumber (If known) Last Name

Debtor 1

P	art 2:	List Others to Be Notifi	ed for a Debt	That You Aiready	Listed
a(gency is try ou have mo	ing to collect from you for a	debt you owe to of the debts that	someone else, list the you listed in Part 1, l	a debt that you already listed in Part 1. For example, if a collection e creditor in Part 1, and then list the collection agency here. Similarly, if ist the additional creditors here. If you do not have additional persons to
	N/A				On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
	City		State	ZIP Code	-
	N/A	e magent ellingi um magitt printeriori model i constitutivati timbric di presidenti ellimite ellinetti.	engagya i a central di sentral di dia sentral di di se	artes de em en de acumbida de debendo amb em differen Cammin (Cilimia e Cilimia). A del Cilimia de Artes (Cilimia).	On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	N/A				
	Number	Street	***************************************		- -
	City	voolookining karantaan va	State	ZIP Code	-
	N/A		e de la companya de l		On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			- -
	City		State	ZIP Code	
	N/A				On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
	City		State	ZIP Code	_
	N/A	em en en en en em en	e en	and the second s	On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
	City		State	ZIP Code	
	N/A				On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			_
	City		State	ZIP Code	-

Fil		Case 19-23313-		c 1	Filed 07/09/19	Enter 63		19 09:09:25	Desc	;
De	ebtor 1	Raymond	C.		Reavis					
	ebtor 2	First Name	Mktdle Name		Last Name	_				
	oouse, if filing)		Middle Name	lavani	Last Name					
		Bankruptcy Court for the: D	ISITICE OF INEW	Jersey					☐ Ch	eck if this is an
	ise number known)								am	ended filing
Of	ficial F	Form 106E/F								
Sc	ched	ule E/F: Cred	ditors \	Who	Have Unse	cure	ed Clair	ms		12/15
List A/B cred nee any	the other : Property ditors with ded, copy additiona	party to any executory (Official Form 106A/B) partially secured clain	contracts or and on Sche ns that are lis it out, numbe ne and case n	unexpedule G sted in the e number		esult in a and Unex Vho Have	ı claim. Also l pired Leases e Claims Secu	list executory co (Official Form 10 <i>ired by Property</i> .	ntracts on 6G). Do no If more sp	Schedule ot include any pace is
	_ ′	editors have priority un to Part 2.	secured clair	ms aga	iinst you?					
	Yes.) (U Fait 2.								
: 1 : 1	each claim nonpriority unsecured	a listed, identify what type amounts. As much as po- claims, fill out the Contir	of claim it is. ossible, list the nuation Page c	If a cla e claims of Part	r has more than one priori im has both priority and no s in alphabetical order acc 1. If more than one credito	onpriority ording to or holds a	amounts, list t the creditor's particular clai	hat claim here an name. If you have	d show bot more than	h priority and two priority
	(For an ex	pianation of each type of	ciaim, see the	e instru	ctions for this form in the i	nstruction	1 DOOKIE(.)	Total claim	Priority amount	Nonpriority amount
2.1		a/Dept of Ed.		_ La	st 4 digits of account num	ıber <u>9</u>	5 9 8	\$ <u>7,188.38</u>	\$ <u>7,188</u> .	38 \$ 0.00
	•	ditor's Name Dirtdrive			nen was the debt incurred	4.4	10/2008			
	Number	Street		_						
	Cheste	erfield MO	63005		of the date you file, the c Contingent	iaim is: O	песк ан that арр	ııy.		
	City	State	ZIP Code		Unliquidated					
		urred the debt? Check one	. .	ā						
	Debto	•		T						
		r 2 only r 1 and Debtor 2 only		-	pe of PRIORITY unsecu		1;			
		st one of the debtors and and	other		Domestic support obligation Taxes and certain other deb			<u>.</u>		
		k if this claim is for a con		—	Claims for death or persona	•	*			
		im subject to offset?	•	_	intoxicated	inquiy win	ile you were			
	No No				Other. Specify			_		
2,2	☐ Yes	est times that the court is timed to be provided in the court of the c								ttiinoonillaanamuu kannuu bran 20 t kaali maqaana ah kaadan
2,2	N/A Priority Cred	litor's Name		_ La:	st 4 digits of account num	ber		\$	\$	\$
	•			Wi	en was the debt incurred	?				
	Number	Street		- As	of the date you file, the c	laim is: C	heck all that app	Iv.		
					Contingent		moon an mar app	,,,		
	City	State	ZIP Code		Unliquidated					
	Who incu	irred the debt? Check one	١.		Disputed					
	Debtor	•		Tv:	pe of PRIORITY unsecui	ed claim	\ :			
	Debtor				Domestic support obligation					
		1 and Debtor 2 only	thar		Taxes and certain other deb		the governmen	t		
		st one of the debtors and and			Claims for death or persona	-	-			
	Is the cla ☐ No	im subject to offset?	mamiy dest		intoxicated Other. Specify			_		
.,	☐ Yes	and the second commence of the second control of the second contro	Part 11 1 2 2 4 1 2 2 1 2 2 2 2 2 2 2 2 2 2	, , , , ,	ann an gaireann an an gairgeach gheagair a an gaireann an an ann an an an an ann an an an a			a a may nay ang magang an magang panang	· Primer de l'acceptant de des l'acceptant	e generale communicación de la

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r listing any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriori amount
N/A	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	rast 4 digits of account number	•		*
•	When was the debt incurred?			
Number Street	Witell was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	As of the date you me, the claim is. Gleck all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
•	☐ Disputed			
Who incurred the debt? Check one.	_ b.op.a.ou			
Debtor 1 only	Type of PRIORITY unsecured claim:			
	Type of Fittorti i unsecuted claim.			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	☐ Claims for death or personal injury white you were			
The team of the second	intoxicated			
Check if this claim is for a community debt	Other, Specify			
	— Other, openity			
s the claim subject to offset?				
□ No				
☐ Yes				
				em enemer electrolers enemer katt
N/A	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
	When was the debt incurred?			
Number Street	When was the debt mounted?			
	As of the date you file the claim is: Check all that apply			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
City State Zir Gode				
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another				
	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated			
	Other. Specify			
s the claim subject to offset?				
□ No				
Tyes		7. National Conference (National Conference (Nation	enonger and the second	EMPLOYING THE COLUMN
		A Commence of Spinor City and Spinor City and Spinor City and City	- The state of the	
N/A	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
	When was the debt incurred?			
fumber Street				
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
	☐ Disputed			
Who incurred the debt? Check one.	•			
Debtor 1 only	Type of PRIORITY unsecured claim:			
	. Jes of Castar Landoodrea diamit			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
7 05-4 1446-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	intoxicated		Nilladd Stanonionaethau Fodkomo Lidmaniciani	Dota Scotle modical desirables des
Check if this claim is for a community debt	Other. Specify			
a the above assistant to 1865-186	— Suidi oponij			
s the claim subject to offset?				
⊒ No				
Yes				

Ragisse nt	9-23313-J K S	Doc 1	Filled v07/09/19	Entered 07/09/19 09:09:2	<u>25 Desc</u>
First Name	Middle Name	Last Name	Petition Page	24 of 63	

Pa	rt 2: List All of Your NONPRIOR	ITY Uns	ecured Claims							
3.	Do any creditors have nonpriority uns No. You have nothing to report in this Yes									
4.	List all of your nonpriority unsecured of nonpriority unsecured claim, list the credit included in Part 1. If more than one credit claims fill out the Continuation Page of Page	itor separa tor holds a	itely for each claim.	. For each claim listed, identify wha	at type of claim it is. Do not	list clain	ns aiready			
	-					Total	claim			
4.1	Affinity Financial Credit Union Nonpriority Creditor's Name	<u></u>		Last 4 digits of account number	2 8 8 2	\$	2,899.31			
	73 Mountainview Blkvd			When was the debt Incurred?	08/14/2018					
	Number Street Basking Ridge	NJ	07920 ZIP Code	As of the date you file, the claim	le: Chark all that anniv					
	Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	Contingent Unilquidated Disputed	io. Chook an arec apply.					
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	ıred claim:					
	At least one of the debtors and another			Student loans Obligations arising out of a separ	ration agreement or divorce					
	☐ Check if this claim is for a communities the claim subject to offset?	ity debt		that you did not report as priority Debts to pension or profit-sharing	claims					
	✓ No ☐ Yes			Other. Specify	•					
	A North Annie Anni		-yyk zfragold), dollfirmiy yeyeliydd ilinaiska llafiinia (forebria'n yeiliniad		1 8 6 Q	entrational and an experience	3,700.54			
4,2	AFS AmerFinancial Solutions L Nonpriority Creditor's Name P.O. Box 65018	LC		Last 4 digits of account number When was the debt incurred?		\$	0,100.01			
	Number Street	MD	21264	As of the date you file, the claim	is: Check all that apply.					
		State	ZIP Code	☐ Contingent						
	Who Incurred the debt? Check one. Debtor 1 only			☐ Unliquidated☐ Disputed☐						
	Debtor 2 only			Type of NONPRIORITY unsecu	ıred claim:		:			
	☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another			Student loans						
	☐ Check if this claim is for a communi	ity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify 						
	is the claim subject to offset? ☑ No									
	☐ Yes	om drawy reduced NA 684/SAC				WARDON TREES (2017-11)				
1.3	Barclay's Card Services Nonpriority Creditor's Name			Last 4 digits of account number	8 4 8 6	\$	3,297.01			
	P. O. Box 8801			When was the debt incurred?		-				
	Number Street Wilmington	DE	18899	A - of the determinant	to a Character at the America					
		State	ZIP Code	As of the date you file, the claim Contingent	is: Check all that apply.					
	Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only			Unliquidated Disputed						
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	ıred claim:					
	At least one of the debtors and another	tu dah=		Student loans	taklan anyanyan ay at.					
	☐ Check if this claim is for a communities the claim subject to offset?	ny aest		Obligations arising out of a separ that you did not report as priority	claims					
	No Yes			Debts to pension or profit-sharing Other. Specify						

Part 2:

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First Name	Mkidle Name	Last Name	Petition	Pag

Your NONPRIORITY Unsecured Claims — Continuation Page

r listing any entries on this page, numb	er them beginning wit	h 4.4, followed by 4.5, and so forth.	Total claim		
Commercial Acceptance Compa	ny	Last 4 digits of account number R 7 7 3	<u>\$_1,000.00</u>		
Nonpriority Creditor's Name P.O. Box 3268 West Main Street	:	When was the debt incurred?			
Number Street Shiremanstown F	PA 17011	As of the date you file, the claim is: Check all that apply.			
	ete ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim: Student loans			
At least one of the debtors and another	. dala	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
☐ Check if this claim is for a community is the claim subject to offset? ☑ No ☐ Yes	r debt	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify			
JFK Medical Medical Center Nonpriority Creditor's Name		Last 4 digits of account number 1 7 5 7	\$ <u>250.0</u>		
P.O. Box 11913		When was the debt incurred?			
Number Street Newark N	IJ 07101	As of the date you file, the claim is: Check all that apply.			
City Ste		☐ Contingent			
Who incurred the debt? Check one.		☐ Unliquidated ☐ Disputed			
Debtor 1 only		La Disputed			
Debtor 2 only		Type of NONPRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only At least one of the debtors and another		Student loans			
Check if this claim is for a community	doht	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 			
□ Check if this claim is for a community is the claim subject to offset?	uept	Debts to pension or profit-sharing plans, and other similar debts			
Sine claim subject to onset? ☐ No ☐ Yes		Other. Specify			
Middlesex Emergency Phys PA		Last 4 digits of account number 9 0 7 1	_{\$} 160.0		
Nonpriority Creditor's Name P. O. Box 740021		When was the debt incurred?			
Number Street)H	As of the date you file, the claim is: Check all that apply.			
City Sta	te ZIP Code	Contingent			
Who incurred the debt? Check one.		☐ Unliquidated ☐ Disputed			
Debtor 1 only		·			
Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:			
At least one of the debtors and another		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that			
Check if this claim is for a community	debt	you did not report as priority claims			
Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify			
□ No □ Yes		— Ono. Spoor			

Schedule E/F Part 2: Your NONPROITY Unsecured Claims - Continuation page

4-6

Navient

Nonpriority Creditors Name P. O. Box 9533

Number Street

Wilkes-Barre PA 18773 Zip Code State City

Total claim \$905.59

Last 4 digits of account number $4 \ 3 \ 5 \ 3$

When was the debt incurred?

As of the date you filed the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Who incurred the debt? Check one.

* Debtor 1 only

is the claim subject to offset?

' No

Type of NON PRIOITY unsecured Claim:

Student Loan

Obligations arising out of a separation agreement or divorce that you did not report as a priory claim

Debts to pension or profit sharing plan, and other similar debts

Other. Specify: N/A

4-7

Snap-On-Credit LLC 950 Technology Way Suite 301 Number Street Libertyville, IL

City

State

60048 Zip Code

Last numbers digits of account number 8455 \$1,588.64

Total claim

When was the debt incurred

As of the date you filed the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Who incurred the debt? Check one.

Debtor 1 only

is the claim subject to offset?

· No

Type of NON PRIOITY unsecured Claim:

Student Loan

Obligations arising out of a separation agreement or divorce that you did not report as a priory claim

Debts to pension or profit sharing plans, and other similar debts

Other, Specify: N/A

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4-8

University Hospital Nonpriority Creditors Name

P. O. Box 3009 Number Street

Newark

NJ Zip Code

J 07103

City State

.

Last 4 digits of account number 6 792

Total claim \$873,642.26

When was the debt incurred?

As of the date you filed the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Who incurred the debt? Check one.

' Debtor 1 only

is the claim subject to offset?

' No

Type of NON PRIOITY unsecured Claim:

Student Loan

Obligations arising out of a separation agreement or divorce that you did not report as a priory claim

Debts to pension or profit sharing plans, and other similar debts

Other Specify: N/A

4-9

University Physician Associates of NJ

Nonpriority Creditors Name

30 Bergen Street Number Street

Newark

City

NJ State 07107 Zip Code Last 4 digits of account number $6 \ 7 \ 9 \ 2$

Total claim \$13,329.59

As of the date you filed the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Who incurred the debt? Check one.

Is the claim subject to offset?

Debtor 1 only

' No

Type of NON PRIOITY unsecured Claim

Student Loan

Obligations arising out of a separation agreement or divorce that you did not report as a priory claim

Debts to pension or profit sharing plans, and other similar debts

Other: Specify: N/A

9

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4-10

University Physician Assoc. of NJ

Nonpriority Creditors Name

P. O. Box 18181 Number Street

Newark

NJ

07101

City

State

Zip Code

Total claim

Last 4 digits of account number 6 8 2 6

<u>6</u> <u>8</u> <u>2</u> <u>6</u> \$171.91

When was the debt incurred?

As of the date you filed the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Who incurred the debt? Check one.

' Debtor 1 only

Is the claim subject to offset?

' No

Type of NON PRIOITY unsecured Claim:

Student Loan

Obligations arising out of a separation agreement or divorce that you did not report as a priory claim.

Debts to pension or profit sharing plans, and other similar debts

Other Specify: N/A

4-11

Zales Customer Service 375 Ghent Road

Number

Street \$1,030.32

Arkon City OH 44333

State Zip Code

Total claim

Last 4 digits of account number 7 0 3 5

\$1,030

When was the debt incurred

As of the date you filed the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Who incurred the debt? Check one.

' Debtor 1 only

is the claim subject to offset?

· No

Type of NON PRIOITY unsecured Claim:

Student Loan

Obligations arising out of a separation agreement or divorce that you did not report as a priory claim

Debts to pension or profit sharing plans, and other similar debts

Other. Specify: N/A

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art 3: List Others to Be Notified About a Debt That You Already Listed

V/A		On which entry in Part 1 or Part 2 did you list the original creditor?
tame		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Str	90(Part 2: Creditors with Nonpriority Unsecured Clai
		Last 4 digits of account number
ity	State ZiP	Code
V/A		On which entry in Part 1 or Part 2 did you list the original creditor?
ame		Line of (Check and D. Dort 4: Oreditors with Deiselby Uncorrect Chine
umber Stre	get	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
unio,		Claims Claims
	A. HD	Last 4 digits of account number
ity N/A	State ZIP	Code On which again, in Don't 4 as Don't 2 did you list the eniminal analitan?
N/A ame		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Stre	pel	Part 2: Creditors with Nonpriority Unsecured Claims
ity	State ZIP	Last 4 digits of account number
V/A		On which entry in Part 1 or Part 2 did you list the original creditor?
ame		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Stre	et	Part 2: Creditors with Nonpriority Unsecured
**************************************		Claims
	7/0	Last 4 digits of account number
ity www.poggoweens.common.or	State ZIP	
N/A ame		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Stre	eet	Part 2: Creditors with Nonpriority Unsecured
		Claims
ity	State ZIP	Last 4 digits of account number
VA	атом поряду и мого ил перетом на него на история от таки поставителя выдолжения от выполнения от выполнения обще	On which entry in Part 1 or Part 2 did you list the original creditor?
ame		tine of (Object analy) Dort to Occality and the Delaying University Claims
umber Stre	et	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
		Claims Claims
ly	State ZIP	Last 4 digits of account number
I/A	ACCO LII Destinational canada canada canada canada canada con considera canada con canad	
ame		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
ımber Stre		Part 2: Creditors with Nonpriority Unsecured

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First Name Middle Name

eme Petition

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim	
Total claims	6a. Domestic support obligations	6a. _{\$} 0.00	
from Part 1	6b. Taxes and certain other debts you owe the government	e 6b. <u>\$</u> 0.00	ı -
	6c. Claims for death or personal injury while y intoxicated	you were 6c. \$ 0.00	-
	6d. Other. Add all other priority unsecured claims Write that amount here.	s. 6d. + s7,188.38	-
	Se. Total. Add lines 6a through 6d.	6e. \$	_
		Total claim	
Total claims	6f. Student loans	6f. \$0.00	
from Part 2	6g. Obligations arising out of a separation ago or divorce that you did not report as priori claims		
	6h. Debts to pension or profit-sharing plans, a similar debts	and other 6h. \$ 0.00	_
and the filters	 Other. Add all other nonpriority unsecured of Write that amount here. 	aims. 6i. + _{\$} 1,788,946.70	
	6j. Total. Add lines 6f through 6i.	^{6j.} \$ 1,788,946.70	

Entered 07/09/19 09:09:25 Case 19-23313-JKS Doc 1 Filed 07/09/19 Page 31 of 63 Fill in this information to identify your case: Raymond C. Reavis Debtor Debtor 2 Middle Name (Spouse If filling) First Name Last Name United States Bankruptcy Court for the: District of New Jersey Case number Check if this is an (If known) amended filing Official Form 106G Schedule G: Executory Contracts and Unexpired Leases 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known). 1. Do you have any executory contracts or unexpired leases? No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B). 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases. State what the contract or lease is for Person or company with whom you have the contract or lease 2.1 N/A Name Number Street City State ZIP Code N/A Name Number Street City State ZIP Code 2.3 Name N/A Street Number City ZIP Code State 2.4 Name Number Street City State ZIP Code N/A Name Number Street City State ZIP Code

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Fill in this i	nformation to identify	your case:				
Debtor 1	Raymond	C.	Reavis			
Debtor 2	First Name	Middle Name	Last Name			
(Spouse, if filing	g) First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	District of New Jersey				
Case number	·				Check if the	nis is:
(11 (6:00111)						ended filing
						plement showing postpetition chapter 13 e as of the following date:
	orm 106I	•			MM / D	DD / YYYY
Sche	dule I: You	ır Income				12/15
supplying co	prrect information. If ye parated and your spot	ou are married and not fi use is not filing with you o top of any additional pa	iling jointly, and yo , do not include in	our spouse is formation ab	living with your spo	or 2), both are equally responsible for rou, include information about your spouse. use. If more space is needed, attach a known). Answer every question.
1. Fill in you informati	ur employment ion.		Debtor 1			Debtor 2 or non-filing spouse
attach a s	re more than one job, separate page with on about additional s.	Employment status		y ed	i de la companya de l	☐ Employed☐ Not employed
	art-time, seasonal, or					
Occupatio	oyed work. on may include student naker, if it applies.	Occupation	Courier			
	•	Employer's name	Ammon Labs	\$		
		Employer's address	32 E. Blanck Number Street			Number Street
			Linden City	NJ State ZIP	07036 Code	City State ZIP Code
		How long employed the	·	-		3 years
Part 2:	Give Details About	Monthly Income				
Estimate spouse un	monthly income as of nless you are separated our non-filing spouse ha	the date you file this for	er, combine the info	ormation for a	l employers fo	rite \$0 in the space. Include your non-filing
				For	Debtor 1	For Debtor 2 or non-filing spouse
		ary, and commissions (b calculate what the monthl		2. <u>\$</u>	2,119.14	\$
3. Estimate	and list monthly over	time pay.		3. +\$	84.74	+ \$
4. Calculate	e gross income. Add li	ne 2 + line 3.		4. \$ <u>2</u>	2,203.88	\$

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	· ····································			r Debtor 1	For Debtor 2 or non-filing spouse	
Co	ppy line 4 here	→ 4.	\$_	2,203.88	\$	
5. Lis	st all payroll deductions:					
5	a. Tax, Medicare, and Social Security deductions	5a.	\$	195.89	\$	
5	b. Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	
5	c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	
5	d. Required repayments of retirement fund loans	5d.	\$_	0.00	\$	
5	e. Insurance	5e.	\$_	81.29	\$	
5	f. Domestic support obligations	5f.	\$_		\$	
5	g. Union dues	5g.	\$_		\$	
5	h. Other deductions. Specify:	5h.	+\$_		+ \$	
6. A	dd the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$	277.18	\$	
7. C	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,926.70	\$	
8. L .i	st all other income regularly received:					
8:	 Net income from rental property and from operating a business, profession, or farm 					
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		•	0.00	•	
	monthly net income.	8a.	\$		\$	
	b. Interest and dividends	8b.	\$_	0.00	\$	
8	 Family support payments that you, a non-filing spouse, or a depende regularly receive 	ent				
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	
	f. Unemployment compensation	8d.	\$	0.00	\$	
8	e. Social Security	8e.	\$	0.00	\$	
81	f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	ice				
	Specify:	8f.	\$	0.00	\$	
89	g. Pension or retirement income	8g.	\$	0.00	\$	
8	n. Other monthly income. Specify:	8h.	+\$_	0.00	+\$	•
9. A (dd all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	0.00	\$	
	iculate monthly income. Add line 7 + line 9. d the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	1,926.70	+ \$ =	\$
	ate all other regular contributions to the expenses that you list in Sched					
frie	rlude contributions from an unmarried partner, members of your household, years or relatives.			-		
	not include any amounts already included in lines 2-10 or amounts that are recify:			to pay expen	ises listed in <i>Schedule J.</i>	\$0.00
12. A d	d the amount in the last column of line 10 to the amount in line 11. The	result	is the	combined mo	nthly income.	4 000
Wr	ite that amount on the Summary of Your Assets and Liabilities and Certain S	tatisti	cal Info	ormation, if it a	ipplies 12.	\$1,926.70 Combined
	you expect an increase or decrease within the year after you file this f	orm?				monthly income
	Yes. Explain:					

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Fill in thi	is information to identify	your case:					
	Raymond	C.	Reavis				
Debtor 1	First Name	Mkidie Name	Last Name	Check	if this is:		
Debtor 2 (Spouse, if t	filing) First Name	Middle Name	Last Name	1	amended fi	_	
United Sta	ates Bankruptcy Court for the:	District of New Jerse	у			showing post f the following	petition chapter 13
Case num (If known)	ber		<u>.</u>	MM	/ DD / YYYY		
Officia	l Form 106J						
	edule J: Yo	ur Expen	ses				12/15
informatio	nplete and accurate as p on. If more space is need . Answer every question	led, attach another s	ed people are fili heet to this form	ng together, both are equa . On the top of any addition	lly responsi nal pages, w	ble for supply rite your nam	ing correct e and case number
Part 1:	Describe Your Ho	usehold					
1. Is this a	joint case?						
	Go to line 2. Does Debtor 2 live in a	separate household	?				
	☐ No☐ Yes. Debtor 2 must fi	le Official Form 106J-	2, Expenses for S	eparate Household of Debto	r 2.		
2. Do you	have dependents?	☑ No		Dependent's relationship to		Dependent's	Does dependent live
Do not li Debtor 2	ist Debtor 1 and 2.	Yes. Fill out thi each depender	s information for nt	Debtor 1 or Debtor 2	narrasanin radioanni dala	age	with you?
Do not s	state the dependents'						No Yes
						-	No D Yes
							□ No
				***************************************			☐ Yes
							□ No
							☐ Yes
				PHILIP			No □ Yes
	expenses include	☑ No					· u res
yoursel	f and your dependents?	☐ Yes	and a first of the forest section of the first profession and the first section of the first	en white party is also recommend in the most constitution of transmit the contract of the cont	a warner water and and and a warner of a section of the section of	antaranda am Estada e e e descendada de trem do de estados estados de estados e	en de dersong was service a more des a mosquera place des en entre entre en realité réglis à
Part 2:	Estimate Your Ongo	ing Monthly Expe	nses				
	as of a date after the bar			re using this form as a supental <i>Schedule J</i> , check the			
	penses paid for with no					Your expe	nses
	stance and have include			first mortgage payments and	i		ium Chahannach is ann an ann air aid a 1469 is in 1664 is in 1665
	nt for the ground or lot.	expenses for your re	salderice: mosade	mot mongago paymonto and	4.	\$	180.00
	ncluded in line 4:					Φ.	0.00
	eal estate taxes				4a.	\$	0.00
	roperty, homeowner's, or i		_		4b.	\$	0.00
	ome maintenance, repair,		S		40.	Ф	0.00
4d. H	omeowner's association o	r condominium dues			4d.	a	0.00

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Debtor 1

Reavis

Case number (if known)

Mathita Math				Your exp	penses
	. 5	Additional mortgage nayments for your residence, such as home equity loans	5	\$	0.00
6. Electricity, heat, natural gas 6. 5			0.		
Statement Stat	6.			4	
				\$	
1.				\$	FO 00
7. Food and housekeeping supplies 7. \$ 200.00 8. Childcare and children's education costs 8. \$ 200.00 9. Ciciothing, laundry, and dry cleaning 9. \$ 200.00 10. Personal care products and services 10. \$ 30.00 11. Medical and dental expenses 10. \$ 200.00 12. Transportation, include gas, maintenance, bus or train fare. 12. \$ 50.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 10.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. 5 0.00 15a. Life insurance educated from your pay or included in lines 4 or 20. 15b. \$ 0.00 15b. Health insurance. 15c. \$ 0.00 15c. Vehicle insurance. Specify: 15d. \$ 0.00 15c. Vehicle insurance. Specify: 15d. \$ 0.00 15c. Vehicle insurance included from your pay or included in lines 4 or 20. 15c. \$ 0.00 15c. Vehicle insurance include taxes deducted from your pay or included in lines 4 or 20. 15c. Vehicle insurance included in lines 4 or 20. 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Vehicle insurance included in lines 4 or 20. 17c. Other. Specify: 17c. Other. Specify: 0.00			6c.	\$	50.00
	•	6d. Other. Specify:	6d.	\$	
10 Personal care products and services 10 2 30.00 11 Medical and dental expenses 11 2 30.00 12 Transportation, include gas, maintenance, bus or train fare. 2 50.00 13 Entortainment, clubs, recreation, newspapers, magazines, and books 13 5 10.00 14 Charitable contributions and religious donations 14 5 0.00 15 Insurance 15 5 5 0.00 15 Insurance 16 5 5 0.00 15 Insurance 16 5 5 0.00 16 Chier insurance deducted from your pay or included in lines 4 or 20. 16 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 17 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 18 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 19 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 10 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 10 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 10 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 11 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 12 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 13 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 16 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 17 Cother. Specify.	7.	Food and housekeeping supplies	7.	\$	200.00
10 Personal care products and services 10 \$ \$ \$ \$ \$ \$ \$ \$ \$	8.	Childcare and children's education costs	8.	\$	
11. Medical and dental expenses 11. \$ 230.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. 5.0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 10.00 14. Charitable contributions and religious donations 14. \$ 0.000 15. Insurance.	9.	Clothing, laundry, and dry cleaning	9.	\$	
12 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12 \$ 50.000 13 Entertainment, clubs, recreation, newspapers, magazines, and books 13 \$ 10.000 14 Charitable contributions and religious donations 14 \$ 0.000 15 Insurance 15 Insurance 15 \$ 0.000 16 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 17 Installment or lease payments: 17 \$ 0.000 17 Installment or lease payments: 17 \$ 0.000 17 Installment or lease payments for Vehicle 1 17 \$ 0.000 17 Other. Specify: 17 \$ 0.000 18 Your payments for Vehicle 2 17 \$ 0.000 19 Other payments of vehicle 1, Your Income (Official Form 108). 18 \$ 0.000 19 Other payments of alimony, maintenance, and support that you did not report as deducted from your your your your pay on line 5, Schedule 1, Your Income (Official Form 108). 0.000 19 Other payments you make to support others who do not live with you. 0.000 19 Other payments of alimony, maintenance, and support that you did not report as deducted from your your your your your your your line 5, Schedule 1, Your Income (Official Form 108). 0.000 19 Other payments of alimony, maintenance, and support that you did not report as deducted from your your your your line 5, Schedule 1, Your Income (Official Form 108). 0.000 17 Other paym	10.	Personal care products and services	10.	\$	30.00
Do not include car payments. 12 30.000	.11.	Medical and dental expenses	11.	\$	230.00
14. Charitable contributions and religious donations 14. \$ 0.00	12.	•	12.	\$	50.00
15. Insurance. 20. 2	13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	10.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	14.	Charitable contributions and religious donations	14.	\$	0.00
15a. Life insurance 15a. 9.00 15b. Health insurance 15b. 9.00 15c. Vehicle insurance 15c. 9.00 15c. Vehicle insurance. Specify:	15.				
15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 266.16 15d. Other insurance. Specify:			159	\$	0.00
15c. Vehicle insurance 15c. \$ \$ 266.16 15d. Other insurance. Specify: 15d. \$ 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 356.16 17b. Car payments for Vehicle 2 17b. \$ 228.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106!). 18. \$ 0.00 19. Other payments you make to support others who do not live with you. Specify: 19. \$ 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00				¢	0.00
15d. Other insurance. Specify:				φ¢	· · · · · · · · · · · · · · · · · · ·
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:				φ	
Specify:		ou. Other insurance. Specify.	150.	Ψ	
17a. Car payments for Vehicle 1 17a. \$ 356.16 17b. Car payments for Vehicle 2 17b. \$ 228.00 17c. Other. Specify:	16,	· · · · ·	16.	\$	0.00
178. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). 18. \$ 0.00 19. Other payments you make to support others who do not live with you. Specify: 19. \$ 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses	17.	Installment or lease payments:			
17c. Other. Specify:		17a. Car payments for Vehicle 1	17a.	\$	356.16
17d. Other. Specify:		17b. Car payments for Vehicle 2	17b.	\$	228.00
17d. Other. Specify:		17c. Other. Specify:	17c.	\$	0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.00 19. Other payments you make to support others who do not live with you. Specify:			17d.	\$	0.00
Specify:	18.		18.	\$	0.00
20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Variables of this form or on Schedule I: Your Income. 20a. \$	19.	Other payments you make to support others who do not live with you.			
20a. Mortgages on other property 20a. \$		Specify:	19.	\$	0.00
20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00	20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ie.		
20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00		20a. Mortgages on other property	20a.	\$	0.00
20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00		20b. Real estate taxes	20b.	\$	0.00
200. Malitorianos, ropair, and apriosp superiors		20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20e. Homeowner's association or condominium dues 20e. \$		20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
		20e. Homeowner's association or condominium dues	20e.	\$	0.00

Filed 07/09/19 Entered 07/09/19 09:09:25 Case 19-23313-JKS Doc 1 Page 36 of 63 Petition Raymond Reavis Case number (if known) Debtor 1 Last Name 0.00 Other. Specify: Calculate your monthly expenses. 1,620.32 22a. 22a. Add lines 4 through 21. 0.00 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. 1,621.32 23. Calculate your monthly net income. 1,926.70 Copy line 12 (your combined monthly income) from Schedule I. 23a. 1,620.31 Copy your monthly expenses from line 22c above. 23b. 23b. 23c. Subtract your monthly expenses from your monthly income. 306.39 The result is your monthly net income. 23c 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? ☐ No. ☑ Yes. Explain here: Should I be granted a bankruptcy discharge, I would not have some of the expenses that I now currently have.

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Debtor 1 Raymond C. Reavis

First Name Middle Name Last Name

Debtor 2 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: District of New Jersey

Case number (If known)

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
id you pay or agree to pay someone who	o is NOT an attorney to help you fill out bankruptcy forms?
1 No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
nder penalty of periury. I declare that I h	ave read the summary and schedules filed with this declaration and
at they are true and correct.	**************************************
α	
Karawal K Kens	*
signature of Debtor 1	Signature of Debtor 2
06/25/2019	Date
MM / DD / YYYY	MM / DD / YYYY

Case 19-23313-JKS Doc 1 Filed 07/09/19 Entered 07/09/19 09:09:25 Petition Page 38 of 63 Fill in this information to identify your case: Raymond Reavis Debtor 1 First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of New Jersey Check if this is an (If known) amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 04/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Give Details About Your Marital Status and Where You Lived Before Part 1: 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? **▼** No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Dates Debtor 2 Dates Debtor 1 Debtor 2: Debtor 1: lived there lived there Same as Debtor 1 Same as Debtor 1 1108 Wheatsheaf Rd 06/05/1999 From _ Number Street Number Street 06/26/2019 Τo Linden NJ 07036 City State ZIP Code City State ZIP Code Same as Debtor 1 Same as Debtor 1 From From Number Number Street Street To City State ZIP Code State ZIP Code 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2:

Explain the Sources of Your Income

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Debtor 1	Raymond C. First Name Middle Name Last I	Reavis	Case nul	mber (# known)	
	LR21 (AB)IIG WINGO KAIIIG F421)	Agrito			
Fill in	you have any income from employmen n the total amount of income you received u are filing a joint case and you have inco	l from all jobs and all busi	nesses, including part-tir	ne activities.	ndar years?
	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross income (before deductions an exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$ 13,223.28	Wages, commissions, bonuses, tipsOperating a business	\$
	For last calendar year: (January 1 to December 31,2018)	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$30,275.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For the calendar year before that:	Wages, commissions, bonuses, tips	s 39,663.00	Wages, commissions, bonuses, tips	¢
	(January 1 to December 31, 2017 YYYY)	Operating a business	Ψ	Operating a business	¥
unen gaml List e	ide income regardless of whether that incomployment, and other public benefit paym bling and lottery winnings. If you are filing each source and the gross income from e No Yes. Fill in the details.	ents; pensions; rental inco a joint case and you have	ome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once t you listed in line 4.	suits; royalties; and
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of Income Describe below.	Gross income from each source (before deductions an exclusions)
	From January 1 of current year until the date you filed for bankruptcy:		\$		· \$
	the date you med for bankraptoy.		\$ \$		· \$
	For last calendar year:		\$. \$
	(January 1 to December 31,2018)		\$	p	. \$
	YYYY		\$		\$
	For the calendar year before that:	Unemployment	\$ 8,287.00		\$

25,569.00

(January 1 to December 31,2017)

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Debtor 1

aymond

Reavis

Case number (if known)_

7	•
11	

List Certain Payments You Made Before You Filed for Bankruptcy

☐ No.	Neither Debtor 1 nor Debtor 2 has primaril "incurred by an individual primarily for a personal			defined in 11 U.S.C. § 101	(8) as
	During the 90 days before you filed for bankr	•	= ,	6,825* or more?	
	☐ No. Go to line 7.				
	Yes. List below each creditor to whom yo total amount you paid that creditor. I child support and alimony. Also, do * Subject to adjustment on 4/01/22 and every	Do not include pa not include paym	yments for domestic suppents to an attorney for this	oort obligations, such as s bankruptcy case.	٠
7 Vac	. Debtor 1 or Debtor 2 or both have primaril	v consumer deh	ate.	•	
amii IC3	During the 90 days before you filed for bankri			300 or more?	
	□ No. Go to line 7.	-	,,		
	Yes. List below each creditor to whom yo creditor. Do not include payments fo alimony. Also, do not include payme	r domestic suppo	ort obligations, such as ch	ild support and	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Affinity Credity Union	04/04/2019	\$ 1,068.00	\$755.71	☐ Mortgage
	Creditor's Name				☑ Car
	73 Mountain View Blvd	- 0 <u>5/04/2019</u>			Credit card
		05/05/2019			Loan repayment
	Pooling Bidge— N.L. 07020				Suppliers or vendors
	Basling Ridge NJ 07920 City State ZIP Code				☐ Other
	M & T Bank Creditor's Name	03/11/2019	\$ 684.00	\$ 9,226.64	☐ Mortgage
	365 Tucker Avenue	04/10/2019			🗹 Car
	Number Street	0-7/10/2018			Credit card
		05/06/2019			☐ Loan repayment
	Number Street	***************************************			☐ Loan repayment☐ Suppliers or vendors
		***************************************			☐ Loan repayment
	Number Street Union N City State ZtP Code	***************************************	\$	\$	☐ Loan repayment☐ Suppliers or vendors
	Number Street Union Na 07083	***************************************	\$	\$	☐ Loan repayment ☐ Suppliers or vendors ☐ Other
	Number Street Union N City State ZtP Code	***************************************	\$	\$	Loan repayment Suppliers or vendors Other Mortgage
	Union Name 07083 City State ZIP Code	***************************************	\$	\$	Loan repayment Suppliers or vendors Other Mortgage Car
	Union Name 07083 City State ZIP Code	***************************************	\$	\$	Loan repayment Suppliers or vendors Other Mortgage Car Credit card

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ZIP Code

State

Însider's Name

Street

Number

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D

					U		
Debtor 1	Raymond		C.	Reavis	(Case number (#known)	
	First Name	Middle Name	Last Name				

ist all such matters, including personal nd contract disputes.			suit, court action, or admit orces, collection suits, patern		
á No					
Yes. Fill in the details.					
	Natur	e of the case	Court or agency		Status of the case
Case title			Court Name		Pending
					On appeal
			Number Street		Concluded
Case number	Ì				
			City State	e ZIP Code	
					en la companya de la
Constille			0		Pending
Case title			Court Name		On appeal
			Number Street		Concluded
			Number Street		Concluded
Case number			City State	e ZIP Code	
			City	e Zir Code	
No. Go to line 11. Yes. Fill in the information below.		. Describe the property			Value of the property
		Describe the property		Date	
				Date	Value of the property
Yes. Fill in the information below.				Date	
Yes. Fill in the information below. Creditor's Name		Explain what happene	ıd	Date	
Yes. Fill in the information below. Creditor's Name		Explain what happene	d possessed.	Date	
Yes. Fill in the information below. Creditor's Name		Explain what happene Property was re	nd possessed. reclosed.	Date	
Yes. Fill in the information below. Creditor's Name	ZIP Code	Explain what happene Property was red Property was for Property was ga	nd possessed. reclosed.	Date	
Yes. Fill in the information below. Creditor's Name Number Street	ZIP Code	Explain what happene Property was red Property was for Property was ga	nd possessed. reclosed. arnished. tached, seized, or levied.	Date	\$
Yes. Fill in the information below. Creditor's Name Number Street	ZIP Code	Explain what happene Property was report was for Property was gare Property was att	nd possessed. reclosed. arnished. tached, seized, or levied.		\$
Yes. Fill in the information below. Creditor's Name Number Street	ZIP Code	Explain what happene Property was report was for Property was gare Property was att	nd possessed. reclosed. arnished. tached, seized, or levied.		
Yes. Fill in the information below. Creditor's Name Number Street	ZIP Code	Explain what happene Property was report was for Property was gare Property was att	nd possessed. reclosed. arnished. tached, seized, or levied.		\$
Creditor's Name Number Street City State	ZIP Code	Explain what happene Property was report was for Property was gare Property was att	possessed. reclosed. arnished. tached, seized, or levied.		\$
Creditor's Name Number Street City State	ZIP Code	Explain what happene Property was re Property was for Property was ga Property was att Describe the property Explain what happene	possessed. reclosed. rmished. tached, seized, or levied.		\$
Creditor's Name Number Street City State	ZIP Code	Explain what happene Property was reporty was for Property was gate Property was attended to be property. Explain what happene	possessed. reclosed. arnished. tached, seized, or levied. d		\$
Creditor's Name Number Street City State	ZIP Code	Explain what happene Property was re Property was for Property was ga Property was att Describe the property Explain what happene	possessed. reclosed. arnished. tached, seized, or levied. d possessed. reclosed.		\$

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Reavis Raymond Debtor 1 Case number (# known) 11. Within 90 days before you filed for bankruptcy, dld any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. Describe the action the creditor took Date action **Amount** was taken Creditor's Name Number Street State ZiP Code Last 4 digits of account number: XXXX-___ _ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☑ No Yes Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Value Gifts with a total value of more than \$600 Describe the gifts Dates you gave the gifts per person Person to Whom You Gave the Gift Number Street State ZIP Code City Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift

City

Number Street

Person's relationship to you _

State ZIP Code

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Vithi	n 2 years before you filed for bank	kruptcy, did you give any gifts or contributions wit	h a total value	of more than \$6	00 to any charity?
Z N	lo				
	es. Fill in the details for each gift or	contribution.			
_	3 .,				
	Gifts or contributions to charities	Describe what you contributed		Date you contributed	Value
	that total more than \$600	A STATE OF THE STA		Contributed	
			May make a straight of the str		
-			a appearance as a second		\$
U	harity's Name				
_	· · · · · · · · · · · · · · · · · · ·				\$
Ni	umber Street				
141	nilingi oraer		ŀ		
Ci	ity State ZIP Code				
t 6:	List Certain Losses				
☑ N □ Y	es. Fill in the details.	Describe any insurance coverage for the loss		Date of your	Value of property
1 N	lo es. Fill in the details. Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property.	ding insurance	Date of your loss	Value of property lost
√ N 1 √	lo es. Fill in the details. Describe the property you lost and	Include the amount that insurance has paid. List pend	ding insurance		
√ N 1 M	lo es. Fill in the details. Describe the property you lost and how the loss occurred	Include the amount that insurance has paid. List pend	ding insurance		
2	lo es. Fill in the details. Describe the property you lost and how the loss occurred	Include the amount that insurance has paid. List pend	ding insurance		
2	lo es. Fill in the details. Describe the property you lost and how the loss occurred	Include the amount that insurance has paid. List pend	ding insurance		
И М	lo es. Fill in the details. Describe the property you lost and how the loss occurred	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property.	ding insurance		
N Y	lo es. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or To	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property. ransfers	ding insurance		lost
N Y	lo es. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Tonia 1 year before you filed for banki	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property. ransfers ruptcy, dld you or anyone else acting on your beha	ding insurance		lost
vou c	lo es. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Time 1 year before you filed for bankle consulted about seeking bankrupt	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property. ransfers ruptcy, dld you or anyone else acting on your behalter or preparing a bankruptcy petition?	ding insurance	er any property	lost \$
N Y	lo des. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or To in 1 year before you filed for bank consulted about seeking bankrupt de any attorneys, bankruptcy petition	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property. ransfers ruptcy, dld you or anyone else acting on your beha	ding insurance	er any property	lost \$
Nithingou concluction	lo des. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Thin 1 year before you filed for bankle consulted about seeking bankrupted any attorneys, bankruptcy petition to	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property. ransfers ruptcy, dld you or anyone else acting on your behalter or preparing a bankruptcy petition?	ding insurance	er any property	lost \$
Nithing on cluck	lo des. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or To in 1 year before you filed for bank consulted about seeking bankrupt de any attorneys, bankruptcy petition	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property. ransfers ruptcy, dld you or anyone else acting on your behact or preparing a bankruptcy petition? n preparers, or credit counseling agencies for services	alf pay or trans	er any property	lost \$
t 7:	List Certain Payments or To 1 year before you filed for bankronsulted about seeking bankrupto any attorneys, bankruptcy petition	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property. ransfers ruptcy, dld you or anyone else acting on your behalter or preparing a bankruptcy petition?	alf pay or trans	er any property bankruptcy. Date payment or	\$to anyone
Nothing on Concluction	List Certain Payments or Toonsulted about seeking bankrupted about seeking bankrupted any attorneys, bankruptcy petition of the seeking bankrupted es. Fill in the details.	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property. ransfers ruptcy, dld you or anyone else acting on your behact or preparing a bankruptcy petition? n preparers, or credit counseling agencies for services	alf pay or trans	er any property	lost \$
t 7: Withing ou concluction	List Certain Payments or To 1 year before you filed for bankronsulted about seeking bankrupto any attorneys, bankruptcy petition	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property. ransfers ruptcy, dld you or anyone else acting on your behalory or preparing a bankruptcy petition? n preparers, or credit counseling agencies for services Description and value of any property transferred	alf pay or trans	fer any property r bankruptcy. Date payment or transfer was	\$to anyone
t 7: Withing the conclusion of the conclusion o	List Certain Payments or Toonsulted about seeking bankrupted about seeking bankrupted any attorneys, bankruptcy petition of the seeking bankrupted es. Fill in the details.	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property. ransfers ruptcy, dld you or anyone else acting on your behalory or preparing a bankruptcy petition? n preparers, or credit counseling agencies for services Description and value of any property transferred	alf pay or trans	fer any property r bankruptcy. Date payment or transfer was	\$to anyone
Note that the state of the stat	List Certain Payments or To any attorneys, bankruptcy petition of es. Fill in the details.	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property. ransfers ruptcy, dld you or anyone else acting on your behalory or preparing a bankruptcy petition? n preparers, or credit counseling agencies for services Description and value of any property transferred	alf pay or trans	fer any property r bankruptcy. Date payment or transfer was	\$to anyone
N N Y V V V V V V V V V V V V V V V V V	List Certain Payments or To any attorneys, bankruptcy petition of es. Fill in the details.	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property. ransfers ruptcy, dld you or anyone else acting on your behalory or preparing a bankruptcy petition? n preparers, or credit counseling agencies for services Description and value of any property transferred	alf pay or trans	fer any property r bankruptcy. Date payment or transfer was	\$to anyone
Note that the state of the stat	List Certain Payments or To any attorneys, bankruptcy petition of es. Fill in the details.	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property. ransfers ruptcy, dld you or anyone else acting on your behalory or preparing a bankruptcy petition? n preparers, or credit counseling agencies for services Description and value of any property transferred	alf pay or trans	fer any property r bankruptcy. Date payment or transfer was	\$to anyone
Note that the second of the se	List Certain Payments or To any attorneys, bankruptcy petition of es. Fill in the details.	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property. ransfers ruptcy, did you or anyone else acting on your behalicy or preparing a bankruptcy petition? n preparers, or credit counseling agencies for services Description and value of any property transferred	alf pay or trans	fer any property r bankruptcy. Date payment or transfer was	\$to anyone
Note that the second of the se	List Certain Payments or To the consulted about seeking bankrupted any attorneys, bankruptcy petition of the consulted about seeking bankrupted early attorneys, bankruptcy petition of the consulted about seeking bankrupted early attorneys, bankruptcy petition of the consulted about seeking bankruptcy petition o	Include the amount that insurance has paid. List pend claims on line 33 of Schedule A/B: Property. ransfers ruptcy, did you or anyone else acting on your behalicy or preparing a bankruptcy petition? n preparers, or credit counseling agencies for services Description and value of any property transferred	alf pay or trans	fer any property r bankruptcy. Date payment or transfer was	\$to anyone

Person Who Made the Payment, if Not You

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Person's relationship to you

Person Who Received Transfer

Person's relationship to you ___

State ZIP Code

Number Street

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Raymond Reavis Case number (if known) Debtor 1 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Mo No ☐ Yes. Fill in the details. Description and value of the property transferred Date transfer was made Name of trust Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Z No Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved, closing or transfer or transferred Name of Financial Institution Checking XXXX-__ ■ Savings Number Street Money market Brokerage City State ZIP Code Other_ Checking XXXX-Name of Financial Institution ☐ Savings Money market Number Street ■ Brokerage Other_ State ZIP Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? **☑** No Yes, Fill in the details. Who else had access to it? Describe the contents Do you still have it? 🔲 No Yes Name of Financial Institution Name Number Street

ZIP Code

Number Street

State

City

State

ZIP Code

City

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Reavis Debtor 1 Case number (if known) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else has or had access to it? Do you still Describe the contents have it? ☐ No Name of Storage Facility Name Yes Number Street Number Street City State ZIP Code State ZIP Code Part 9: **Identify Property You Hold or Control for Someone Else** 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **☑** No Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name Number Street Number Street ZIP Gode City ZIP Code State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Governmental unit Name of site Number Street Number Street City State ZIP Code

City

State

ZIP Code

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	No			
	Yes. Fill in the details.			
		Governmental unit	Environmental law, if you know it	Date of notice
	Name of site	Governmental unit	-	
	Number Street	Number Street		
	<u> </u>	City State ZIP Code	-	
	City State ZIP Code			
ave	e you been a party in any judicial or ad	lministrative proceeding under a	y environmental law? Include settle	ements and orders.
Z	No			
.	Yes. Fill in the details.			
		Court or agency	Nature of the case	Status of the case
	Case title	···		☐ Pending
		Court Name		On appea
		Number Street		• •
		Number Street		• • • • • • • • • • • • • • • • • • • •
	Case number	Number Street City State ZIP Co	de	Concluded
rt 1	1: Give Details About Your Bu	City State ZIP Co	/ Business	Conclude
t 1 Viti (_	City State ZIP Connections to Anotocy, did you own a business or in a trade, profession, or other a pany (LLC) or limited liability par	/ Business ave any of the following connection ctivity, either full-time or part-time	Conclude
t 1 Viti (1: Give Details About Your Burin 4 years before you filed for bankrul A sole proprietor or self-employed A member of a limited liability com A partner in a partnership	State ZIP Connections to Anyotcy, did you own a business or hin a trade, profession, or other a pany (LLC) or limited hability partecutive of a corporation	r Business eave any of the following connection of the full-time or part-time enership (LLP)	Conclude
t 1 Vith	1: Give Details About Your Burnin 4 years before you filed for bankrul A sole proprietor or self-employed A member of a limited liability com A partner in a partnership An officer, director, or managing ex	State ZIP Connections to Anotecy, did you own a business or hin a trade, profession, or other a pany (LLC) or limited liability particular of a corporation and or equity securities of a corpo	r Business eave any of the following connection of the full-time or part-time enership (LLP)	Concluded
t 1 With (1: Give Details About Your Burnin 4 years before you filed for bankrul A sole proprietor or self-employed A member of a limited liability com A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the voting	State ZIP Connections to Anyotcy, did you own a business or hin a trade, profession, or other a pany (LLC) or limited hiability particular of a corporation or equity securities of a corporation	r Business ave any of the following connection ctivity, either full-time or part-time mership (LLP)	Conclude
t 1 With (Give Details About Your Burnin 4 years before you filed for bankrup A sole proprietor or self-employed A member of a limited liability com A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the voting No. None of the above applies. Go to Pares. Check all that apply above and fill	State ZIP Connections to Anyotcy, did you own a business or hin a trade, profession, or other a pany (LLC) or limited hiability particular of a corporation or equity securities of a corporation	y Business vave any of the following connection ctivity, either full-time or part-time cnership (LLP) ration siness. Employer Identifi	Concluded
viti* (1: Give Details About Your Burnin 4 years before you filed for bankrup A sole proprietor or self-employed A member of a limited liability com A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the voting No. None of the above applies. Go to F	City State ZIP Contents or Connections to Anyotcy, did you own a business or in a trade, profession, or other a pany (LLC) or limited liability pareceutive of a corporationing or equity securities of a corporate 12.	y Business vave any of the following connection ctivity, either full-time or part-time enership (LLP) ration siness. Employer identifi Do not include So	Concluder ns to any business? cation number or ITIN.
Viti*	Give Details About Your Burnin 4 years before you filed for bankrup A sole proprietor or self-employed A member of a limited liability com A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the voting No. None of the above applies. Go to Pares. Check all that apply above and fill	City State ZIP Connections to Anotecy, did you own a business or hin a trade, profession, or other a pany (LLC) or limited flability paracecutive of a corporation agor equity securities of a corporation at 12. In the details below for each business of the business of the paracecutive of the business of the corporation at 12.	rave any of the following connection obtivity, either full-time or part-time enership (LLP) ration siness. Employer identification on the control of the	cation number
Viti*	1: Give Details About Your Burnin 4 years before you filed for bankrul A sole proprietor or self-employed A member of a limited liability com A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the voting No. None of the above applies. Go to Press. Check all that apply above and fills Business Name	City State ZIP Contents or Connections to Anyotcy, did you own a business or in a trade, profession, or other a pany (LLC) or limited liability pareceutive of a corporationing or equity securities of a corporate 12.	rave any of the following connection obtivity, either full-time or part-time enership (LLP) ration siness. Employer identification on the control of the	cation number
Viti*	1: Give Details About Your Burnin 4 years before you filed for bankrul A sole proprietor or self-employed A member of a limited liability com A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the voting No. None of the above applies. Go to Press. Check all that apply above and fills Business Name	City State ZIP Connections to Anotecy, did you own a business or hin a trade, profession, or other a pany (LLC) or limited flability paracecutive of a corporation agor equity securities of a corporation at 12. In the details below for each business of the business of the paracecutive of the business of the corporation at 12.	rave any of the following connection ctivity, either full-time or part-time enership (LLP) ration siness. Employer identifi Do not include So Ein:	cation number
Viti* (1: Give Details About Your Burnin 4 years before you filed for bankrul A sole proprietor or self-employed A member of a limited liability com A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the voting No. None of the above applies. Go to Press. Check all that apply above and fills Business Name	Siness or Connections to Anyotcy, did you own a business or hin a trade, profession, or other a pany (LLC) or limited liability paracecutive of a corporation ag or equity securities of a corporation fart 12. In the details below for each business of the business of the nature of the business of accountant or bookkeep	ration Siness Employer Identifi Do not include So EIN: Dates business e From	Concluded to any business? cation number or ITIN. xisted To
Viti* (1: Give Details About Your Butter in 4 years before you filed for bankrup A sole proprietor or self-employed A member of a limited liability com A partner in a partnership An officer, director, or managing expansion of the above applies. Go to Five Section 1. The control of the above applies of the Yes. Check all that apply above and fill Business Name Number Street	City State ZIP Connections to Anotecy, did you own a business or hin a trade, profession, or other a pany (LLC) or limited flability paracecutive of a corporation agor equity securities of a corporation at 12. In the details below for each business of the business of the paracecutive of the business of the corporation at 12.	ration Siness Employer Identification Einer Dates business e Employer Identification Ener Dates business e Employer Identification	Concluded to any business? cation number or ITIN. xisted To
Viti*	Give Details About Your Burnin 4 years before you filed for bankrup A sole proprietor or self-employed A member of a limited liability com A partner in a partnership An officer, director, or managing extension An owner of at least 5% of the voting No. None of the above applies. Go to Fives. Check all that apply above and fills Business Name	Siness or Connections to Anyotcy, did you own a business or hin a trade, profession, or other a pany (LLC) or limited liability paracecutive of a corporation ag or equity securities of a corporation fart 12. In the details below for each business of the business of the nature of the business of accountant or bookkeep	rave any of the following connection obtivity, either full-time or part-time enership (LLP) ration Siness. Employer Identifi Do not include Science Dates business efform Employer Identifi Do not include Science Employer Identification Dates business efform Employer Identification Do not include Science Identification Do not Include Identification Do not Include Identificatio	cation number poial Security number or ITIN.
Viti*	1: Give Details About Your Butter in 4 years before you filed for bankrup A sole proprietor or self-employed A member of a limited liability com A partner in a partnership An officer, director, or managing expansion of the above applies. Go to Five Section 1. The control of the above applies of the Yes. Check all that apply above and fill Business Name Number Street	Siness or Connections to Anyotcy, did you own a business or hin a trade, profession, or other a pany (LLC) or limited liability paracecutive of a corporation ag or equity securities of a corporation fart 12. In the details below for each business of the business of the nature of the business of accountant or bookkeep	rave any of the following connection obtivity, either full-time or part-time enership (LLP) ration Siness. Employer Identifi Do not include Science Dates business efform Employer Identifi Do not include Science Employer Identification Dates business efform Employer Identification Do not include Science Identification Do not Include Identification Do not Include Identificatio	Concluded to the control of the cont

Debtor 1

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First Name		C.	Reavis	Case number (# known)
	Middle Name	Last N	leme	
		er er en	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Business Name				EiN:
Number Street	t		Name of accountant or bookkeeper	Dates business existed
City	State	ZIP Code		From To
City	State	ZIP Gode		
Within 2 years be institutions, credi No Yes. Fill in the	litors, or other	r parties.	tcy, did you give a financial stater Date issued	nent to anyone about your business? Include all financial
Name			MM / DD / YYYY	
			term 1 DD 7 TTT 1	
Number Street	ł			
City	State	ZIP Code		
rt 12: Sign Be	low		venigo, una	
I have read the a answers are true in connection with 18 U.S.C. §§ 152	answers on the and correct. ith a bankrup to 1341, 1519, to 1	. I understand tcy case can	d that making a false statement, c	chments, and I declare under penalty of perjury that the oncealing property, or obtaining money or property by fraud imprisonment for up to 20 years, or both.
I have read the a answers are true in connection wing 18 U.S.C. §§ 152. Signature of December 206/25/20	answers on the and correct. ith a bankrup t, 1341, 1519, and the second	. I understand toy case can and 3571.	that making a false statement, c result in fines up to \$250,000, or Statement Signature of Debte	oncealing property, or obtaining money or property by fraud imprisonment for up to 20 years, or both.
I have read the a answers are true in connection wing 18 U.S.C. §§ 152. Signature of December 206/25/20	answers on the and correct. ith a bankrup t, 1341, 1519, and the second	. I understand toy case can and 3571.	that making a false statement, c result in fines up to \$250,000, or Statement Signature of Debte	oncealing property, or obtaining money or property by fraud imprisonment for up to 20 years, or both.
I have read the a answers are true in connection will 18 U.S.C. §§ 152 Signature of Delay Date 06/25/20 Did you attach and No Yes	answers on the and correct. ith a bankrup t, 1341, 1519, the bestor 1	I understand toy case can and 3571.	that making a false statement, c result in fines up to \$250,000, or Statement Signature of Debte	oncealing property, or obtaining money or property by fraudimprisonment for up to 20 years, or both. or 2 ordividuals Filing for Bankruptcy (Official Form 107)?

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Fill in this inf	formation to ident	ify your case:	
Debtor 1	Raymond First Name	C. Middle Name	Reavis Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States I	Bankruptcy Court for t	he: District of New Jerse	у
Case number (If known)			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Schedule D information below.	: Creditors Who Have Claims Secured by Property (Offici	al Form 106D), fill in the
identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: Affinity Credit Union	☐ Surrender the property.	□No
 Martin and the state of the sta	Retain the property and redeem it.	☑ Yes
property securing debt: 2014 VW Jetta	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's name M & T Bank	✓ Surrender the property.	
	Retain the property and redeem it.	☐ Yes
Description of property 2013 VW Jetta securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's name: Freedomroad Financial	☑ Surrender the property.	☑ No
	Retain the property and redeem it.	☐ Yes
Description of KTM Duke Motorcycle property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
-	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	☑ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
· ·	Retain the property and [explain]:	

12/15

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Debtor 1

Raymond		C.	Petition Feavis	Page 51 of 63 Case number (If known)
First Name	Middle Name	ast Name			·

	e G: Executory Contracts and Unexpired Leases (Official Form 106G), leases are leases that are still in effect; the lease period has not yet trustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases	3 (1-1/-)
	Will the lease be assumed?
Lessor's name: N/A	□ No
Description of leased property:	☐ Yes
Lessor's name: N/A	□ No
Description of leased property:	Yes
Lessor's name: N/A	□ No
Description of leased property:	☐ Yes
Lessor's name: N/A	□ No
Description of leased property:	· · Yes
Lessor's name: N/A	□ No
Description of leased property:	Yes
Lessor's name: N/A	□ No
Description of leased property:	☐ Yes
Lessor's name: N/A	attractive and the same that a surface and the state of the same and t
Description of leased property:	☐ Yes

Fill in this	Case 19-23313-		Filed 07/09/19	Entered 07/09/19 09:09:25 Desc f 63
Debtor 1	Raymond	C.	Reavis	7
Debtor 2	First Name	Middle Name	Last Name	_
(Spouse, if filin		Middle Name	Last Name	-
	es Bankruptcy Court for the:	District of New Jersey		
(If known)	er	UR. MANAGEMENT AND THE STATE OF		
				☐ Check if this is an amended filing
Official	Form 122A—1	Supp		
		 _	n Presumptic	on of Abuse Under § 707(b)(2) 12/1
exempted fi exclusions	om a presumption of al	ouse. Be as complete s to only one of you,	and accurate as possib	Income (Official Form 122A-1), if you believe that you are le. If two married people are filing together, and any of the complete a separate Form 122A-1 if you believe that this is
Part 1: Id	lentify the Kind of De	ebts You Have		
personal,		ose." Make sure that y		S.C. § 101(8) as "incurred by an individual primarily for a with the answer you gave at line 16 of the <i>Voluntary Petition for</i>
	Go to Form 122A-1; on the ubmit this supplement with			s no presumption of abuse, and sign Part 3. Then
Yes. G	So to Part 2.			
Part 2: De	etermine Whether Mi	ilitary Service Pro	visions Apply to You	
		Sundia 20 H C O C 22	744(4)\0	
	disabled veteran (as de	ninea in 36 U.S.C. § 3	/41(1))?	
Yes. D	So to line 3. Did you incur debts mostly 0 U.S.C. § 101(d)(1); 32 l		tive duty or while you were	performing a homeland defense activity?
	☑ No. Go to line 3.	D.O.O. § 001(1).		
		1; on the top of page supplement with the si		, There is no presumption of abuse, and sign Part 3.
Mo. C	r have you been a Rese complete Form 122A-1. D Vere you called to active o	o not submit this supp	lement.	vity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
	. Complete Form 122A-1 s. Check any one of the f			
	I was called to active d 90 days and remain on		11, 2001 , for at least	If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1,
	I was called to active d 90 days and was release which is fewer than 540	ed from active duty on		check box 3, <i>The Means Test does not apply now,</i> and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The
	I am performing a hom	eland defense activi	ty for at least 90 days.	exclusion period means the time you are on active duty
	I performed a homelan		•	or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).
	before I file this bankrup		анан эчи чаув	If your exclusion period ends before your case is closed, you may have to file an amended form later.

	Casi	2 19-23313-J	V2 DOCT I	-iieu 0770	9/19		<u>:u 07708</u>	<u> 1/19 U</u>	9.09.25 Desc	
F	ill in this inform	ation to identify yo	our case:			of 63			only as directed in this form	n and in
De	ebtor 1 Rayı	mond	C.	Reavis			Form 122	A-1Sup	p:	
	First N		Middle Name	t.ast Name		-	1 . The	re is no	presumption of abuse.	
	ebtor 2 pouse, if filing) First N	amé	Middle Name	Last Name			2. The	calculat	tion to determine if a presumes will be made under <i>Chap</i> i	ption of
Ur	nited States Bankru	ptcy Court for the: Dis	strict of New Jersey						Calculation (Official Form 1:	
	ise number known)			_					Test does not apply now be itary service but it could app	
							☐ Checl	c if this	is an amended filing	
Oí	ficial For	m 122A—1								
C	hapter 7	' Stateme	ent of You	Curre	nt Mo	onthi	y Inc	ome	•	12/15
spa add do (Ab)	ce is needed, a itional pages, v not have primal use Under § 707	ttach a separate sh write your name an ily consumer debt (b)(2) (Official Fori	neet to this form. Inc d case number (if kr	lude the line nown). If you l lifying militar this form.	number to believe tha	which that you are	ne addition e exempted	al infor	sible for being accurate. If mation applies. On the top presumption of abuse being of Exemption from Presumption from Presump	of any cause you
1.	=	=	atus? Check one only	<i>t</i> .						
		d. Fill out Column A	., lines 2-11. iling with you. Fill ou	t hath Calumn	o A and B	linna 2 1	1			•
	,	•	ining with you. Fill ou IOT filing with you. '				1.			
	_	•	ehold and are not le	-	•		ımne A and	B lines	2_11	
									By checking this box, you de	clare
	under	penalty of perjury th		se are legally:	separated (under nor	nbankruptcy	law tha	t applies or that you and you	
	bankruptcy ca August 31. If th Fill in the result	se. 11 U.S.C. § 101 e amount of your m . Do not include any	(10A). For example, i onthly income varied	f you are filing during the 6 m e than once. F	on Septen onths, add or example	nber 15, t the incor , if both s	he 6-month ne for all 6 spouses ow	period on months n the sa	s before you file this would be March 1 through and divide the total by 6. me rental property, put the	
							Column A Debtor 1	ı	Column B Debtor 2 or non-filing spouse	
2.	Your gross wa (before all payr		onuses, overtime, a	nd commissi	ons		\$ <u>13,22</u>	<u>3,2</u> 8	\$	
3.	Alimony and n Column B is fill		ents. Do not include p	ayments from	a spouse i	f	\$	0.00	\$	
4.	of you or your from an unmarr and roommates	dependents, incluied partner, membe	ch are regularly paid ding child support. I rs of your household, ntributions from a spo ou listed on line 3.	nclude regula your depende	r contributionts, parent	ons s,	\$ <u>9,72</u>	<u>1.9</u> 2	\$	
5.		m operating a bus	iness, profession,	Debtor 1	Debtor 2					
	or farm Gross receipts	(before all deduction	ns)	\$0.00	\$					
	Ordinary and no	ecessary operating	expenses	- \$ <u>0.00</u> -	- \$					
	Net monthly inc	ome from a busines	s, profession, or farm	\$ <u>0.00</u>	\$	Copy here→	\$	0.00	\$	
6.	Gross receipts	om rental and other (before all deduction	ns)	Debtor 1 \$0.00	Debtor 2 \$					
	•	ecessary operating o	·	- \$ <u>0.00</u> -	- 5	Copy_		0.00	•	
7	•	ome from rental or o	. ,	\$ <u>0.00</u>	\$	here ->	-	0 <u>.0</u> 0 0, 00	\$	
1.	uitai 49f GiAide	inds, and royalties					Ψ	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	Ψ	

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Debt	or 1 Raymond C. First Name Middle Name Last Name	Reavis	Case num	ber (if known)		
			Colum Debtor		Column B Debtor 2 or non-filing spouse	
8.	Unemployment compensation		\$	0.00	\$	
	Do not enter the amount if you contend that the amount under the Social Security Act. Instead, list it here:					
	For you					
	For your spouse	Y				
	Pension or retirement income. Do not include any amobenefit under the Social Security Act.		\$	0.00	\$	
10.	Income from all other sources not listed above. Spec Do not include any benefits received under the Social Se as a victim of a war crime, a crime against humanity, or i terrorism. If necessary, list other sources on a separate	ecurity Act or payments received nternational or domestic	d			
			\$	0.00	\$	
			\$	0.00	\$	
	Total amounts from separate pages, if any.		+\$	0.00	+ \$	
11.	Calculate your total current monthly income. Add line column. Then add the total for Column A to the total for C		\$_2	<u>,119.1</u> 4	\$	= \$\(\s_2,119.14\) Total current monthly income
Pa	tt 2: Determine Whether the Means Test App	olies to You			·	
12.	Calculate your current monthly income for the year. I				Program	g the appropriate for programment of the arrange at the arrange of the art of the arrange of the arrange of the
	12a. Copy your total current monthly income from line 1	1	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Сор	y line 11 here 👈	\$ <u>2,119.14</u>
	Multiply by 12 (the number of months in a year).				greens	x 12
	12b. The result is your annual income for this part of the	e form.			12b.	\$ <u>25,429.68</u>
13.	Calculate the median family income that applies to y	ou. Follow these steps:				
	Fill in the state in which you live.	New Jersey				
	Fill in the number of people in your household.	and compression of contract of the contract of			_	
	Fill in the median family income for your state and size o				13.	\$ 60,317.00
	To find a list of applicable median income amounts, go o instructions for this form. This list may also be available a	nline using the link specified in at the bankruptcy clerk's office.	the separ	ate		
14.	How do the lines compare?					
	14a. Line 12b is less than or equal to line 13. On the Go to Part 3.	top of page 1, check box 1, The	ere is no _l	presumption	of abuse.	
	14b. Line 12b is more than line 13. On the top of pag Go to Part 3 and fill out Form 122A-2.	e 1, check box 2, The presump	tion of ab	use is deteri	mined by Form 122A	-2.
Pa	rt 3: Sign Below					
	By signing here, I declare under penalty of perjur	y that the information on this st	atement a	and in any at	tachments is true an	d correct.
	* Hand O'Kins	×				
	Signature of Debtor 1		nature of E	Debtor 2		
	Date 06/25/2019	·				
	Date MM / DD / YYYY	Da		DD /YYYY	-	
	If you checked line 14a, do NOT fill out or file	Form 122A-2.				
	If you checked line 14b, fill out Form 122A-2					
AMAN MAN		reacy of the company of the control	CONTRACTOR OF THE PARTY	AND STREET, ST	a quantitativa management aperiod not all all all transitivations are set of	evinentament is company and the control of the state of a state of the control of

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Fill in this i	nformation to identif	y your case:			Check the appropriate box as d lines 40 or 42:	irected in
Debtor 1	Raymond First Name	C Middle Name	Reavis Last Name		According to the calculations re this Statement:	quired by
Debtor 2 (Spouse, if filing	i) First Name	Middle Name	Last Name		☐ 1. There is no presumption	of abuse.
		: District of New Jerse			2. There is a presumption o	
Case number						·····
(If known)					Check if this is an amend	ded filing
Official I	Form 122A-:	<u>2_</u>				
Chapte	er 7 Means	Test Calc	ulation			04/19
To fill out thi	s form, you will need	your completed cop	y of Chapter 7 Stat	ement of Your Curren	Monthly Income (Official Form 122	A-1).
Be as comple	ete and accurate as i	possible. If two marri	ed people are filing	together, both are eq	ually responsible for being accurate	. If more spac
is needed, at	tach a separate shee	et to this form. Includ	e the line number t	o which the additional	information applies. On the top of a	iny additional
pages, write	your name and case	number (if Known).				
	ataumina Varu Ad	ingled Income				
Part 1: D	etermine Your Ad	justea income				
	4-4-1			Onne Head 44 Section 20	Majal Came 400A & barra	. 0 440 44
i. Copy you	r total current month	ıy ıncome		Copy line 11 from Of	fficial Form 122A-1 here	\$ <u>2,119.1</u> 4
2. Did you fil	l out Column B in Pa	art 1 of Form 122A–1	7			
🗹 No. Fil	I in \$0 for the total on	line 3.				
Yes. Is	your spouse filing wil	th you?				
☑ No	. Go to line 3.					
🗖 Ye	s. Fill in \$0 for the tota	al on line 3.				
3. Adjust yo househole	ur current monthly in d expenses of you o	ncome by subtracting r your dependents. F	g any part of your s ollow these steps:	pouse's income not us	sed to pay for the	
On line 11 regularly u	, Column B of Form 1: sed for the household	22A–1, was any amou expenses of you or yo	nt of the income you our dependents?	reported for your spous	e NOT	
🗹 No. Fil	l in 0 for the total on li	ne 3.				
	ill in the information be					
For e		ch the income was used sed to pay your spouse's dependents		Fill in the amount you are subtracting from your spouse's income		
N/A	\	· · · · · · · · · · · · · · · · · · ·		\$		
				\$		
				+ \$		

4. Adjust your current monthly income. Subtract the total on line 3 from line 1.

\$<u>2,119.1</u>4

0.00

0.00

Copy total here

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Debtor 1

Part 2: **Calculate Your Deductions from Your Income**

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 122A–1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

727.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

Out-of-pocket health care allowance per person

55.00

Number of people who are under 65

7c. Subtotal. Multiply line 7a by line 7b.

55.00 55,00 Copy here

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person

Number of people who are 65 or older

Subtotal. Multiply line 7d by line 7e.

Copy here

Total. Add lines 7c and 7f.....

55.00

Copy total here 55.00

Petition Page 57 of 63 ease number (// known)_____ **Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: ■ Housing and utilities - Insurance and operating expenses ■ Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. 8. Housing and utilities - insurance and operating expenses: Using the number of people you entered in line 5, fill in the 2,583.00 dollar amount listed for your county for insurance and operating expenses. 9. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount listed **\$** 2,583.00 for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment N/A 0.00 Repeat this Copy 0.00 Total average monthly payment amount on here = line 33a. 9c. Net mortgage or rent expense. 2,583.00 Сору 2,583.00 Subtract line 9b (total average monthly payment) from line 9a (mortgage or here rent expense). If this amount is less than \$0, enter \$0..... 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ZÍ 0. Go to line 14. 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense; Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 638.00

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Raymond

Debtor 1

Doc 1

Petition Page 58 of 63 Raymond Debtor 1 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. 2014 VW Jetta Describe Vehicle 1: Vehicle 1 508.00 13a. Ownership or leasing costs using IRS Local Standard. 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60. Average monthly Name of each creditor for Vehicle 1 payment Affinnty Credit Union 356.00 Repeat this Copy 356.00 356.00 Total average monthly payment amount on here 👈 line 33b. Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 152.00 Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0. expense 152.00 here..... 👈 2013 VW Jetta Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard. 508.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Average monthly Name of each creditor for Vehicle 2 payment M & T Bank 228 Repeat this Copy 228 228 Total average monthly payment amount on here 👈 line 33c. Copy net 13f. Net Vehicle 2 ownership or lease expense Vehicle 2 280.00 expense Subtract line 13e from 13d. If this amount is less than \$0, enter \$0..... 280.00 here...' 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim 0.00 more than the IRS Local Standard for Public Transportation.

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Debtor 1

Raymond C

Oti	her Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.			
	Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, Social Security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.		\$	0.00
	Do not include real estate, sales, or use taxes.			
	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		•	0.00
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.		\$	0.00
	Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.		\$	0.00
	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		æ	0.00
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.		Φ	<u> </u>
	Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or			
	■ as a condition for your job, or ■ for your physically or mentally challenged dependent child if no public education is available for similar services.		\$	0.00
	- 101 your physically of montally chancinged depondent and if no public deduction to available for diffinal definitions.			
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.			0.00
	Do not include payments for any elementary or secondary school education.		\$	0.00
	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.		\$	0.00
	Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.	+	\$	50.00
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.			
	Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.		<u>\$_4</u>	,485.00

Case 19-23313-JKS Doc 1 Filed 07/09/19 Entered 07/09/19 09:09:25 Petificavis Page 60 of 62 ese number (if known)_____ Debtor 1 Additional Expense Deductions These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. Health insurance Disability insurance Health savings account 0.00 0.00 Copy total here Total Do you actually spend this total amount?

0.00

0.00

26. Continuing contributions to the care of household or family members. The actual monthly expenses that you will

contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).

By law, the court must keep the nature of these expenses confidential.

continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include

27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of

you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.

■ No. How much do you actually spend?

☐ Yes

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Debtor 1

Raymond

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Deductions for Debt Payment

33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle toans, and other secured debt, fill in lines 33a through 33e.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

	Mortgages on your home:				Average n	•			
33a.	Copy line 9b here			→	\$	0.00			
	Loans on your first two ve	ehicles:							
33b.	Copy line 13b here				\$	356.00			
33c.	Copy line 13e here		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	······ →	\$	228			
33d.	List other secured debts:								
	Name of each creditor for of secured debt		ntify property that ures the debt	Does payment include taxes or insurance?					
	Freedomroad Financ	cial K	TM Motorcycle	✓ No — Yes	\$	117.00			
	Management			□ No □ Yes	\$				
				□ No □ Yes	+ \$				
33e. T	otal average monthly paymen	t. Add lines 33a	through 33d,		S_	117.00	Copy total here→	\$	117.0
. Are a	otal average monthly paymen ny debts that you listed in l her property necessary for y	ine 33 secured	by your primary re	sidence, a vehicle,	Sample of the state of the stat	117.00	1	\$	<u>117.</u> 0
. Are a	ny debts that you listed in li	ine 33 secured	by your primary re	sidence, a vehicle,	\$ 	117.00	1	\$	<u>117.</u> 0
. Are a or ot	ny debts that you listed in l her property necessary for y	ine 33 secured (your support or u must pay to a cossession of you	by your primary re- the support of you reditor, in addition to r property (called th	sidence, a vehicle, ir dependents?	\$	<u>117.0</u> 0	1	\$	<u>117.</u> 0
. Are a or ot	ny debts that you listed in liner property necessary for you. O. Go to line 35. es. State any amount that you listed in line 33, to keep possible.	ine 33 secured (your support or u must pay to a cossession of you	by your primary retent the support of your preditor, in addition to property (called the polow.	sidence, a vehicle, or dependents? The payments of the payments of the cure amount.	. \$	error and an error	1	\$	<u>117.</u> 0
. Are a or ot	ny debts that you listed in liner property necessary for you. O. Go to line 35. State any amount that you listed in line 33, to keep power.	ine 33 secured in your support or unust pay to a cossession of you in the information identify prop	by your primary retent the support of your preditor, in addition to property (called the polow.	sidence, a vehicle, or dependents? The payments of the payments of the cure amount.	Monthly	error and an error	1	\$	<u>117.</u> 0
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. Are a or ot	ny debts that you listed in liner property necessary for you. In the control of the control of the creditor of the creditor. In the control of the creditor of the creditor.	ine 33 secured in your support or unust pay to a cossession of you in the information identify prop	by your primary re- the support of you reditor, in addition to r property (called the n below. erty that Total amou	o the payments a cure amount).	Monthly	error and an error	1	\$	117.0
. Are a or ot	ny debts that you listed in liner property necessary for you. In the control of the control of the creditor of the creditor. In the control of the creditor of the creditor.	ine 33 secured in your support or unust pay to a cossession of you in the information identify prop	by your primary retented the support of your property (called the property (called the property that amount to the property that the property that amount to the property that amount to the property that amount to the property that the property the property that the property the property that the pro	sidence, a vehicle, or dependents? The payments of the payment of the paymen	Monthly amount	error and an error	1	\$	117.0
Are a or of	ny debts that you listed in liner property necessary for you. In the control of the control of the creditor of the creditor. In the control of the creditor of the creditor.	ine 33 secured by your support or unust pay to a cossession of you in the information identify propresecures the cossession of your secures the cossession of your in the information identify propresecures the cossession of your interest in the your interest interest in the cossession of your interest in the your interest interest in the your interest in the your interest in the your interest interest in the your interest in the your interest in the your interest interest in the your interest in the your interest interest in the your interest in the your interest in the your interest interest in the your interest in the your interest interest in the your interest in the your interest interest in the your interest in the your interest in the your interest in the your interest interest in the your interest in the	by your primary retended the support of your property (called the property (called the property that amount of the support of	sidence, a vehicle, or dependents? The payments e cure amount). Cure of the payments e cure amount + 60 =	Monthly amount	error and an error	Copy total	\$ \$	117.0

ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims

 $\div 60 =$

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Petitipe avis Page 62 of 63 ase number (# known)

First Name Middle Name Last Name

For m	ou eligible to file a case under Chapter 137 11 lore information, go online using the link for <i>Bankru</i> ctions for this form. <i>Bankruptcy Basics</i> may also be	iptcy Basics specified in the s	eparate clerk's office.		
☑ No.	Go to line 37.				
Yes	s. Fill in the following information.				
	Projected monthly plan payment if you were filin	g under Chapter 13	\$		Constitution
	Current multiplier for your district as stated on th Administrative Office of the United States Courts North Carolina) or by the Executive Office for Unother districts).	s (for districts in Alabama and	×		
	To find a list of district multipliers that includes y link specified in the separate instructions for this available at the bankruptcy clerk's office.		e		
	Average monthly administrative expense if you v	were filing under Chapter 13	\$	Copy total here →	\$
37. Add all Add line	of the deductions for debt payment. es 33e through 36				\$0.00
Total Dedu	uctions from Income				
38. Add all	of the allowed deductions.				
	e 24, All of the expenses allowed under IRS allowances	\$4,485.00			in many in process and in a second se
Copy line	e 32, All of the additional expense deductions	. \$0.00			ar 600 ar
Copy line	e 37, All of the deductions for debt payment	. +\$0.00			
	Total deductions	\$ <u>4,485.00</u>	Copy total he	re	\$ <u>4,48</u> 5.00
Part 3:	Determine Whether There Is a Presumpt	ion of Abuse			
39. Calcula	ite monthly disposable income for 60 months				
39a. C	opy line 4, adjusted current monthly income	\$2,119.14			
39b. C	opy line 38, Total deductions	4,485.00			ļ
		- \$			
	fonthly disposable income. 11 U.S.C. § 707(b)(2). ubtract line 39b from line 39a.	\$2,365.86	Copy here	\$ <u>-2,365.8</u> 6	
S		\$2,365.86	here →	\$2,365.86 x 60	
S F	ubtract line 39b from line 39a.	\$ -2,365.86	here-	Ψ	s-141,951. ∰
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39d. To	ubtract line 39b from line 39a. For the next 60 months (5 years) otal. Multiply line 39c by 60 It whether there is a presumption of abuse. Che	\$ -2,365.86	here->	x 60 \$ <u>-141,951.60</u> Copy here→	<u>\$-141,95</u> 1. €
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39d. To 40. Find ou The Part The may	ubtract line 39b from line 39a. For the next 60 months (5 years) otal. Multiply line 39c by 60 It whether there is a presumption of abuse. Che line 39d is less than \$8,175*. On the top of page 5. line 39d is more than \$13,650*. On the top of page fill out Part 4 if you claim special circumstances. The	\$ -2,365.86 ck the box that applies: 1 of this form, check box 1, 7 ge 1 of this form, check box 2 hen go to Part 5.	here →	x 60 \$=141,951.6C Copy here→	\$ <u>-141,95</u> 1. 6

Petitipeavis Page 63 of 63 ase number (# known)_____ Debtor 1 41, 41a. Fill in the amount of your total nonpriority unsecured debt. If you filled out A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form...... .25 41b. 25% of your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(l)(l). Copy here 🗗 Multiply line 41a by 0.25. 42. Determine whether the income you have left over after subtracting all allowed deductions is enough to pay 25% of your unsecured, nonpriority debt. Check the box that applies: Line 39d is less than line 41b. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5. Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Then go to Part 5. Part 4: **Give Details About Special Circumstances** 43. Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for which there is no reasonable alternative? 11 U.S.C. § 707(b)(2)(B). No. Go to Part 5. Yes, Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25. You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments. Average monthly expense Give a detailed explanation of the special circumstances or income adjustment Part 5: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Signature of Debtor 1 Signature of Debtor 2 Date MM / DD / YYYY MM / DD / YYYY

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